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Document Number Only

CT Corporation System
660 East Jefferson Street
Tallahassee, FL 32301
850-222-1092

DATE: 10 / 10

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*****70.00 *****70.00

Corporation(s) Name

ORBA Insurance Services, Inc.

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input checked="" type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution	<input type="checkbox"/> Mark
<input type="checkbox"/> LLC	<input type="checkbox"/> Withdrawal	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> UBR	<input type="checkbox"/> Other
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> CE-RA
<input type="checkbox"/> UCC <input type="checkbox"/> 1 or <input type="checkbox"/> 3		

***Special Instructions**

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<input type="checkbox"/> arts/ameds/mergers <input type="checkbox"/> Other-See Above		
<input checked="" type="checkbox"/> Walk in	<input checked="" type="checkbox"/> Pick-up	<input type="checkbox"/> Will Wait

DIVISION OF CORPORATION

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Please Return Filed Stamped
Copies To:

Jeffrey Butterfield

Thank You!

10/10

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. ORBA Insurance Services, Inc.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. California

(State or country under the law of which it is incorporated)

3. 94-2850529

(FEI number, if applicable)

4. 10/04/1982

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon filing

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 2355 Gold Meadow Way, Suite 100, Gold River, CA 95670-4443

(Current mailing address)

8. The marketing of insurance and investment products including, but not limited to, variable universal life, variable annuities, mutual funds and wrap fee accounts.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: _____

PETER F. SOUZA

(Registered agent's signature) **ASSISTANT SECRETARY**

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) *SEE ATTACHMENT*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Rik Jimerson

Address: 2355 Gold Meadow Way, Suite 100

Gold River, CA 95670-4443

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Gary Curry

Address: 2355 Gold Meadow Way, Suite 100

Gold River, CA 95670-4443

Vice President: Rik Jimmerson

Address: 2355 Gold Meadow Way, Suite 100

Gold River, CA 95670-4443

Secretary: Kathi Curry

Address: 2355 Gold Meadow Way, Suite 100

Gold River, Ca 95670-4443

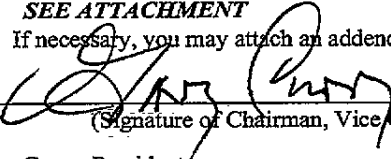
Treasurer: Susan Curry

Address: 2355 Gold Meadow Way, Suite 100

Gold River, CA 95670-4443

SEE ATTACHMENT

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Gary Curry, President

(Typed or printed name and capacity of person signing application)

Attachment to Florida
Application By Foreign Corporation for Authorization to Transact Business In Florida
Officers & Directors

1. Full Name: Gary Curry
Officer/Director: Officer, Director
Officer's Title: President
Business Address: 2355 Gold Meadow Way, Suite 100
City: Gold River
State: CA
ZIP Code: 95670-4443
2. Full Name: Susan Curry
Officer/Director: Officer, Director
Officer's Title: Treasurer/CFO
Business Address: 2355 Gold Meadow Way, Suite 100
City: Gold River
State: CA
ZIP Code: 95670-4443
3. Full Name: Kathi Curry
Officer/Director: Officer, Director
Officer's Title: Secretary
Business Address: 2355 Gold Meadow Way, Suite 100
City: Gold River
State: Ca
ZIP Code: 95670-4443
4. Full Name: Rik Jimmerson
Officer/Director: Officer, Director
Officer's Title: Vice President
Business Address: 2355 Golf Meadow Way, Suite 100
City: Gold River
State: CA
ZIP Code: 95670-4443
5. Full Name: Jerry Vahl
Officer/Director: Director
Business Address: 570 Carillon Parkway
City: St. Petersburg
State: FL
ZIP Code: 33716
6. Full Name: Herb Collins
Officer/Director: Director
Business Address: 570 Carillon Parkway
City: St. Petersburg
State: FL
ZIP Code: 33716

FILED
OCT 10 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of California



SECRETARY OF STATE CERTIFICATE OF STATUS DOMESTIC CORPORATION

FILED
OCT 10 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the **4th day of October, 1982, ORBA INSURANCE SERVICES, INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

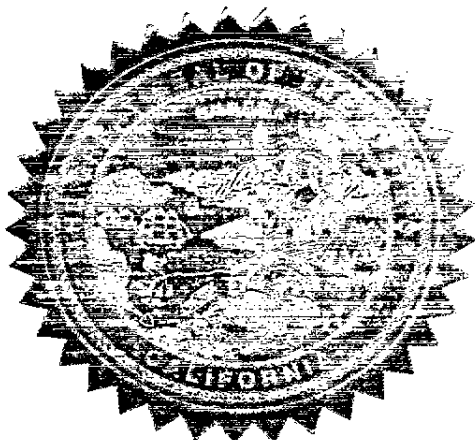
That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of September 28, 2000.



Bill Jones
BILL JONES
Secretary of State

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