

Document Number Only

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CT Corporation System
660 East Jefferson Street
Tallahassee, FL 32301
Tel 850 222 1092
Fax 850 222 7615
Attn: Jeff Netherton

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

CORPORATION(S) NAME

Universal Solutions Insurance Agency, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<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/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
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Order#:

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DIVISION OF CORPORATION

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**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. Universal Solutions Insurance Agency, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of natural person or partnership if not so contained in the name at present.)
2. Delaware 3. 58-2556047
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 06/30/00 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qual
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 5775 Peachtree Dunwoody Rd, B-200, Atlanta, GA 30342
(Principal office address)
- 1100 Town and Country Road, Suite 100 Orange, CA 92868
(Current mailing address)
- Sell and service all personal lines of insurance, including but not limited to auto, homeowner, life, fire and casualty
8. _____
(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
(City) (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: Mary R. Adams MARY R. ADAMS
(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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Tracilee P. Reed

Address: 1100 Town and Country Road, Suite 100

Orange, CA 92868

Vice President: David S. Weiss

Address: 5775 Peachtree Dunwoody Road

Atlanta, Ga 30342

Secretary: Teresa R. Dietz

Address: 5775 Peachtree Dunwoody Road Atlanta, Ga 30342

Treasurer: _____

Address: _____

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. Cory J. Boydston, Vice 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

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TALLAHASSEE, FLORIDA

1. Full Name: Tracilee P. Reed
Officer/Director: Officer
Officer's Title: President
Business Address: 1100 Town and Country Road, Suite 100
City: Orange
State: CA
ZIP Code: 92868
2. Full Name: David S. Weiss
Officer/Director: Officer
Officer's Title: Vice President
Business Address: 5775 Peachtree Dunwoody Road
City: Atlanta
State: Ga
ZIP Code: 30342
3. Full Name: Cory J. Boydston
Officer/Director: Officer
Officer's Title: Vice President
Business Address: 5775 Peachtree Dunwoody Road
City: Atlanta
State: Ga
ZIP Code: 30342
4. Full Name: Peter H. Simons
Officer/Director: Officer
Officer's Title: Vice President
Business Address: 5775 Peachtree Dunwoody Road
City: Atlanta
State: Ga
ZIP Code: 30342
5. Full Name: Michael T. Rand
Officer/Director: Officer
Officer's Title: Vice President
Business Address: 5775 Peachtree Dunwoody Road
City: Atlanta
State: Ga
ZIP Code: 30342

6. Full Name: Teresa R. Dietz
Officer/Director: Officer
Officer's Title: Secretary
Business Address: 5775 Peachtree Dunwoody Road
City: Atlanta
State: Ga
ZIP Code: 30342

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UNIVERSAL SOLUTIONS INSURANCE AGENCY, INC.
List of Directors

Director 1

Ian McCarthy
5775 Peachtree Dunwoody Road, Suite B-200
Atlanta, GA 30342

Director 2

Brian Beazer
5775 Peachtree Dunwoody Road, suite B-200
Atlanta, GA 30342

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TALLAHASSEE, FLORIDA

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UNIVERSAL SOLUTIONS INSURANCE AGENCY, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE. —

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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Edward J. Freel, Secretary of State

AUTHENTICATION: 0811177

DATE: 11-27-00