F01000005835

Central Licensing Bureau, Inc.
SUITE 550
PROSPECT BUILDING
1501 NORTH UNIVERSITY
LITTLE ROCK, ARKANSAS 72207-5271

(501) 664-8044
FAX - (501) 664-6182

[illegible] FLETCHER
President

GENA PEARSHAW, LMI
Senior Vice President

W.H.L. WOODYARD IV
Vice President

October 29, 2001

Florida Secretary of State
Corporate Division
P.O. Box 6327
Tallahassee, FL 32314

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

Dear Sir/Madam:

Enclosed please find the necessary documents to qualify **Group Insurance Administrators, Inc.** to do business in your state.

Thank you for your consideration of this filing.

Sincerely,

Detra Reed
Initial Licensing Division

/dr

Enclosures

FILED
01 NOV -1 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F01-5835

QL

# 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. GROUP INSURANCE ADMINISTRATORS, 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. Pennsylvania
(State or country under the law of which it is incorporated)

3. 23-2085148
(FEI number, if applicable)

4. December 28, 1978
(Date of incorporation)

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

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

7. 666 Township LIne Road
Havertown, PA 19083
(Current mailing address)

8. The business of insurance, functioning as a Third Party Administrator.
(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.*

(Registered agent's signature)
Sean L. Emerick, 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)

Chairman: _____

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: Carol L. Claypoole

Address: 528 Virginia Avenue

Paoli, PA

Director: _____

Address: _____

_____

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

President: Raymond J. Squires

Address: 220 Pine Cove Court

Lehighton, PA

Vice President: William H. Niblock

Address: 107 Devon Road

Paoli, PA

Secretary: Carol L. Claypoole

Address: 528 Virginia Avenue

Paoli, PA

Vice President Frank J. Nenna

Address: 307 Twin Oaks Drive

Havertown, PA

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TALLAHASSEE, FLORIDA

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

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

14. RAYMOND J. SQUIRES
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

OCTOBER 12, 2001

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

GROUP INSURANCE ADMINISTRATORS, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Kim Pizzingrilli

Secretary of the Commonwealth

DPOS