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() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Unange of RA
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() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up
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Verifier W.P. Verifier	· -	Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

MSW Transact				F
words or abbrev	oration; must include the word "INCORF viations of like import in language as will or partnership if not so contained in the r	l clearl	ED", "COMPANY", "CORPORATION" or y indicate that it is a corporation instead of a present.)	FILEU all
. Alabama		3.	Applied For	?
(State or count	ry under the law of which it is incorpora	ted)	(FEI number, if applicable)	
11/30/2001		5.	Perpetual Perpetual	
(Dar	te of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	
. Uonn Dua	lification			
(Date first trans	acted business in Florida. If corporation (SEE SECTIONS 6	has no 07.150	t transacted business in Florida, insert "upon qualification.") 1, 607.1502 and 817.155, F.S.)	
2211 7th Aven	ue South, Birmingham, AL 35233			
	(Principal of	fice ado	dress)	
P. O. Box 1026	5 Birmingham, AL 35202-0265			
	(Current mai	ing add	dress)	
Insurance Age	ncy.			-
•		ate or c	ountry to be carried out in state of Florida)	
(Purpose	(s) of corporation authorized in home sta		•	-
(Purpose	(s) of corporation authorized in home sta		ountry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptable)	
. (Purpose . Name and st . Name:	(s) of corporation authorized in home stareet address of Florida registered C T Corporation System		•	
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Purpose Name and st Name:	(s) of corporation authorized in home stareet address of Florida registered C T Corporation System 1200 South Pine Island Road		(P.O. Box or Mail Drop Box NOT acceptable)	-
. (Purpose . Name and st. Name: Office Address:	(s) of corporation authorized in home statement address of Florida registered C T Corporation System 1200 South Pine Island Road Plantation (City)		(P.O. Box or Mail Drop Box NOT acceptable) , Florida 33324	
. (Purpose . Name and st . Name: Name: Office Address:	(s) of corporation authorized in home statement address of Florida registered C T Corporation System 1200 South Pine Island Road Plantation (City) agent's acceptance:	agent:	(P.O. Box or Mail Drop Box NOT acceptable) , Florida 33324 (Zip code)	 Dlace
Purpose Name and st Name: Office Address: O. Registered Javing been na Jesignated in th	(s) of corporation authorized in home statement address of Florida registered C T Corporation System 1200 South Pine Island Road Plantation (City) agent's acceptance: med as registered agent and to accept application, I hereby accept the acceptance.	agent:	(P.O. Box or Mail Drop Box NOT acceptable) , Florida 33324 (Zip code) vice of process for the above stated corporation at the partners as registered agent and agree to act in this capa	city.
. (Purpose . Name and st . Name: Name: Office Address: 0. Registered Having been na lesignated in th further agree to	(s) of corporation authorized in home stareet address of Florida registered C T Corporation System 1200 South Pine Island Road Plantation (City) agent's acceptance: med as registered agent and to accept the accept and to accept and the accept with the provisions of all stareets.	agent:	(P.O. Box or Mail Drop Box NOT acceptable) , Florida 33324 (Zip code) vice of process for the above stated corporation at the partial timent as registered agent and agree to act in this capair relative to the proper and complete performance of many control of the proper and complete performance of many control of the proper and complete performance of many control of the proper and complete performance of many control of the proper and complete performance of many control of the proper and complete performance of the performance	city.
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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	9
Chairman: Bruce C. Dunbar, Jr.	- F
Address: 2211 7th Avenue South	
Birmingham, AL 35233	SSE
Vice Chairman:	FS W
**	A STATE TO
Address:	
Director:	
Address:	
Director:	1
Address:	
B. OFFICERS SEE ATTACHMENT	
President: Bruce C. Dunbar, Jr.	
Address: 2211 7th Avenue South	
Birmingham, AL 35233	
Vice President:	
Address:	
Secretary: Thomas A. Lambert, III	
Address: 2211 7th Avenue South Birmingham, AL 35233	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional	officers and/or directors.
13. Brew Ohl	10 - Cal licetion
(Signature of Chairman, Vice Chairman, or any officer listed in number	r 12 of the application)
14. Bruce C. Dunbar, Jr., President (Typed or printed name and capacity of person signing applica	tion)
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STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that MSW Transaction Corp. incorporated in Jefferson County, Birmingham, Alabama on November 30, 2001. I further certify that the records do not disclose that said MSW Transaction Corp. has been dissolved.

FILED
OT DEC 18 PN 3: 12
SECRETARISSEE FLORIDA



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

December 14, 2001

Date

Sin Banan

Jim Bennett

Secretary of State