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(Requestor's Name)	
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TRANSMITTAL LETTER

TO: Registration S	Section		
Division of C			
SUBJECT: se2, in	с		
	(Name of corpo	ration - must include suffix)	
Dear Sir or Madam:			
	ation by Foreign Corporation nee," and check are submitted lorida.		
Please return all corre	spondence concerning this ma	atter to the following:	
Brenda Kramer, Senio	or Paralegal		
	(Nam	ne of Person)	
Security Benefit Corp	oration		
	(Firm	/Company)	ALS
One Security Benefit	Place		AS A T
	(/	Address)	ASS ASS
Topeka, KS 66636-00	101		第2 日
	(City/St	ate and Zip code)	FLORA TE
For further informatio	on concerning this matter, plea	ase call:	RIDA
Brenda Kramer	at (<u>785</u>) 438-3085	
(Name of Per	rson) (A	rea Code & Daytime Teleph	ione Number)
STREET AD Registration S Division of Co 409 E. Gaines Tallahassee, F	Section orporations s St. GL 32399	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7
Enclosed is a check fo	or the following amount:		
□ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status &

Certified Copy

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.

se2, inc.		
	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp."))," "COMPANY," "CORPORATION,"
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)
Kansas		20-2640636
	under the law of which it is incorporated)	(FEI number, if applicable)
February 14, 2	2005 5	perpetual
	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
	(SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)
One Security B	enefit Place, Topeka, KS 66636-0001	dunna Time Time Time Time Time Time Time Time
	(Principal office ad	aress)
One Security B	enefit Place, Topeka, KS 66636-0001 (Current mailing ad	dress)
	(Current maning act	Fig. 7
To engage in a	any lawful act or activity	
(Purpose(s	s) of corporation authorized in home state or o	country to be carried out in state of Florida)
Name and street	et address of Florida registered agent: (P.	O. Box NOT acceptable)
Name:	C T Corporation System	
ffice Address:	1200 South Pine Island Road	
	Plantation	, Florida 33324
	(City)	(Zip code)
aving been nam signated in this rther agree to c	application, I hereby accept the appoint	rice of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. relative to the proper and complete performance of my du osition as registered agent.
<u>-</u>	See attached consent	
	(Registered agent's signature	

- 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. DIR	ECTORS	
Chairmar	David J. Keith	
Address:	One Security Benefit Place, Topeka, KS 66636-0001	
	·	
Vice Cha	irman:	
Address:		
Director:	Thomas A. Swank	
Address:	One Security Benefit Place, Topeka, KS 66636-0001	
Director:	J. Michael Keefer	
	One Security Benefit Place, Topeka, KS 66636-0001	
B. OFF	ICERS SEE S	3
President	David J. Keith	
Address:	One Security Benefit Place, Topeka, KS 66636-0001	
		_
	ident: James R. Schmank	
Address:	One Security Benefit Place, Topeka, KS 66636-0001	
Secretary	J. Michael Keefer	_
•	One Security Benefit Place, Topeka, KS 66636-0001	
	Thomas A. Swank	
Address:	One Security Benefit Place, Topeka, KS 66636-0001	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)	
14 Y.N	lichael Keefer - Secretary	

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

Addendum to Application by Foreign Corporation for Authorization to Transact Business in Florida

B.	Ω	T	г	IC	F	D	C
D.	v	г	F	u	£		.3

Vice Presiden	t: Frank D. Memmo
Address:	One Security Benefit Place, Topeka, KS 66636-0001



ACCEPTANCE OF APPOINTMENT

RE:

SE2, Inc.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: April 7, 2005

C T CORPORATION SYSTEM

 $By_{\underline{}}$

Jonathan L. Miles, Assistant Secretary



STATE OF KANSAS OFFICE OF SECRETARY OF STATE RON THORNBURGH

To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the state of Kansas, do hereby certify that, according to the records of this office,

SE2, INC.

KANSAS FOR PROFIT CORPORATION Business Entity ID Number: 6031629

was filed in this office on February 14, 2005 and has complied with the applicable provisions of the laws of the State of Kansas and on this date is in good standing and authorized to transact business or to conduct its affairs within this state.

Dated: 04/21/2005

For Validation:

Certificate ID: 30145

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

https://www.accesskansas.org/businessentity/validate.html

Signed:

RON THORNBURGH SECRETARY OF STATE TILEU 1: 14

2005 MAY 10 PM 1: 14

DIVALLAHASSEE, FLORIDA