

## Florida Department of State

Division of Corporations Public Access System

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5926

### FOREIGN PROFIT/NONPROFIT CORPORATION

Leading Edge Insurance Agency, Inc.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 04      |
| Estimated Charge      | \$70.00 |

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3/22/2006

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

| The second secon |  | ·  |                    |
|--|--|--|--------------------|
| ter name of corporation; must include "INCo.," "Co.," "Corp." "Inc.," "Co.," or "Corp.")   | XORPORATED,  | "COMPANY," "CORPORATION,"  |                    |
| name unavailable in Florida, enter alternate   | corporate name ad  | opted for the purpose of transacting but                                     | siness in Florida) |
| CXAS   | 3  | 20-12849   | 87                 |
| ate or country under the law of which it is in   | (corporated  | (FEI number, if applicab   | le)                |
| fay 25, 2004   | ٠. د   | erpetual   |                    |
| (Date of incorporation)  | 1  | Duration: Year corp. will cease to exis                                      | t or "perpetual")  |
|  |  | Florida, if prior to registration) 2, F.S., to determine penalty liability)  |                    |
| 5844 Rocky Po  | dnt Drive, San Ante  | onio, Texas 78249  |                    |
| (Pt  | ncipal office addre  | <b>*</b> )   |                    |
| 5844 Rocky P   | oint Drive, San Ant  | onio, Texas 78249  |                    |
| (Cu  | rrent mailing addre  | ss)  |                    |
| Sell Property and Casualty Insurance  (Purpose(s) of corporation authorized in  Name and <u>street address</u> of Florida regist  C T Corporation  | ered agent: (P.O.  |  | SECRET             |
| Name: 1200 South Pin   | <del></del>  |  | SSE                |
| Planta   | tion '   | Florida 33324  | 五                  |
| (City  | )  | (Zip code)   | 言言                 |
| Registered agent's acceptance:<br>ving been named as registered agent an<br>ignated in this application, I hereby acc<br>ther agree to comply with the provisions<br>I I am fumiliar with and accept the oblig<br>C T Copposition Syste  | ept the appointm<br>of all statutes re<br>ations of my pos | ent as registered agent and agree to<br>lative to the proper and consulete n | s act in this con  |
|  |  |  |                    |

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12. Names and business addresses of officers and/or directors:

PLONG - 01/03/2004 C T Sympto Online

P. Ø3/Ø4 MAR-22-2006 09:13 Vice Chairman: Address: Director: . Address: Director: Address: B. OFFICERS Address: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director of Officer listed in number 12 of the application)

FLO19 - 02/03/2006 C T System Daline

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

P.04/04

MAR-22-2006 09:13

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



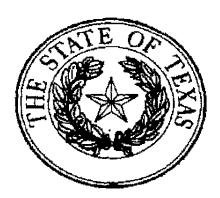
Roger Williams Secretary of State

### Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Asticles of Incorporation for Leading Edge Insurance Agency, Inc. (filing number: 800346030), a Domestic For-Profit Corporation, was filed in this office on May 25, 2004.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 20, 2006.



Roger Williams

Secretary of State

Phone: (S12) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709

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TOTAL P.04