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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: THE ENTRECOR GROUP, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Kim Douglas
(Name of Person)

The Entrecor Group, Inc.
(Firm/Company)

601 6th Ave.
(Address)

Des Moines, IA 50309
(City/State and Zip code)

For further information concerning this matter, please call:

KIM DOUGLAS at (515 245-2015
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 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.

1. THE ENTRECOR GROUP, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")


(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. IOWA 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 08/23/2002 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. TO BE DETERMINED
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 601 6th Ave. Des Moines, IA 50309
(Principal office address)

Same
(Current mailing address)
8. Insurance
(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 NOT acceptable)
Name: C T Corporation System
Office Address: 1200 South Pine Island Rd
Plantation, Florida 33324
(City) (Zip code)

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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) **James M. Halpin**
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: PLEASE SEE ATTACHED

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

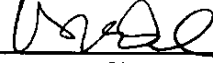
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Michael C. Fitzgerald Vice President & General Counsel
(Typed or printed name and capacity of person signing application)

THE ENTRECOR GROUP, INC.
Directors and Officers
January 1, 2006

BOARD OF DIRECTORS	
Michael E. Abbott	Chairman of the Board
Craig W. Bainbridge, M.D.	Director
Joseph E. Blair, Jr.	Director
Tom D. Eilers	Director
Brent B. (Chris) Green	Director
Burdette N. Heikens	Director
John L. Maginn	Director
James A. Walker	Director

OFFICERS	
Michael E. Abbott	President and Chief Executive Officer
Mary K. Durand	Corporate Secretary
Michael C. Fitzgerald	General Counsel
Sarah J. Roy	Treasurer
Jeffery A. Holloway	Sales Vice President

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Date: 05/02/2006

SECRETARY OF STATE

490 DP-000268643
THE ENTRECOR GROUP, INC.
AMERICAN REPUBLIC INSURANCE COMPANY
ANDREA NELSON
601 6TH AVE.
DES MOINES, IA 50334

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CERTIFICATE OF EXISTENCE

Name: THE ENTRECOR GROUP, INC.
Date of Incorporation: 08/23/2002
Duration: PERPETUAL

I, CHESTER J. CULVER, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify that the corporation named on this certificate is in existence and was duly incorporated under the laws of Iowa on the date printed above, that all fees required by the Iowa Business Corporation Act have been paid by the corporation, that the most recent biennial corporate report has been filed by the Secretary of State, and that articles of dissolution have not been filed.



CHESTER J. CULVER SECRETARY OF STATE

