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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

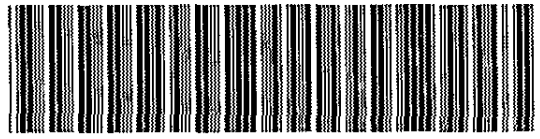
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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TAMPA FLORIDA
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CT

a Wolters Kluwer business

CT
1203 Governors Square Blvd.
Tallahassee, FL 32301-2960

850 222 1092 tel
850 222 7615 fax
www.ctlegalsolutions.com

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 17, 2006

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

Re: Order #: 6504012 WO
Customer Reference 1: PFS, Inc.
Customer Reference 2: Florida

Dear Department of State, Florida:

Please obtain the following:

Primerica Financial Services, Inc. (NV)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan
Senior Fulfillment Specialist
Connie.Bryan@wolterskluwer.com

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. Primerica Financial Services, 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. Nevada 3. 88-0269888
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/20/1991 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3900 Paradise Road, Suite 127, Las Vegas, NV 89109
(Principal office address)

3120 Breckinridge Boulevard, Duluth, GA 30099
(Current mailing address)

8. SEE ATTACHMENT
(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 Road

Plantation, Florida 33324
(City) (Zip code)

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.

C T Corporation System

By: [Signature]
(Registered agent's signature)

MARY R. ADAMS
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:

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TALLAHASSEE, FLORIDA

A. DIRECTORS *SEE ATTACHMENT*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS *SEE ATTACHMENT*

President: Glenn J. Williams

Address: 3100 Breckinridge Boulevard

Duluth, GA 30099

Vice President: Patti B. Castellaw

Address: 3100 Breckinridge Boulevard

Duluth, GA 30099

Secretary: Stanton J. Shapiro

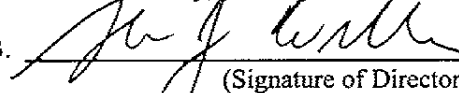
Address: 3100 Breckinridge Boulevard, Duluth, GA 30099

Treasurer: Sharon K. Grubenhoff

Address: 3100 Breckinridge Boulevard, Duluth, GA 30099

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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. Glenn J. Williams, President
(Typed or printed name and capacity of person signing application)

**Attachment to Florida
Purpose Clause**

To engage as an agent, agency or managing general agent in all classes of insurance now or hereafter permitted by statute.

Officers & Directors

- | | | |
|---|-------------------|-------------------------------|
| 1 | Full Name: | Rick L. Mathis |
| | Officer/Director: | Officer,Director |
| | Officer's Title: | Executive Vice President |
| | Director's Title: | Director |
| | Business Address: | 3100 Breckinridge Boulevard |
| | City: | Duluth |
| | State: | GA |
| | ZIP Code: | 30099 |
| 2 | Full Name: | Terrance R. Koepke |
| | Officer/Director: | Officer |
| | Officer's Title: | Assistant Vice President |
| | Director's Title: | |
| | Business Address: | 3900 Paradise Road, Suite 127 |
| | City: | Las Vegas |
| | State: | NV |
| | ZIP Code: | 89109 |
| 3 | Full Name: | Richard W. Atcheson |
| | Officer/Director: | Officer |
| | Officer's Title: | Assistant Secretary |
| | Director's Title: | |
| | Business Address: | 3100 Breckinridge Boulevard |
| | City: | Duluth |
| | State: | GA |
| | ZIP Code: | 30099 |
| 4 | Full Name: | Judy R. Trollinger |
| | Officer/Director: | Officer |
| | Officer's Title: | Assistant Secretary |
| | Director's Title: | |
| | Business Address: | 3100 Breckinridge Boulevard |
| | City: | Duluth |
| | State: | GA |

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	ZIP Code:	30099
5	Full Name:	Alexis P. Ginn
	Officer/Director:	Officer
	Officer's Title:	Executive Vice President
	Director's Title:	
	Business Address:	3100 Breckinridge Boulevard
	City:	Duluth
	State:	GA
	ZIP Code:	30099
6	Full Name:	Melanie J. Mitchell
	Officer/Director:	Officer
	Officer's Title:	Executive Vice President
	Director's Title:	
	Business Address:	3100 Breckinridge Boulevard
	City:	Duluth
	State:	GA
	ZIP Code:	30099
7	Full Name:	Alison S. Rand
	Officer/Director:	Officer
	Officer's Title:	Executive Vice President; Chief Financial Officer
	Director's Title:	
	Business Address:	3100 Breckinridge Boulevard
	City:	Duluth
	State:	GA
	ZIP Code:	30099
8	Full Name:	Wanda S. Smith
	Officer/Director:	Officer
	Officer's Title:	Executive Vice President
	Director's Title:	
	Business Address:	3100 Breckinridge Boulevard
	City:	Duluth
	State:	GA
	ZIP Code:	30099
9	Full Name:	David Wright

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 GEORGIA

	Officer/Director:	Officer
	Officer's Title:	Assistant Secretary
	Director's Title:	
	Business Address:	3100 Breckinridge Boulevard
	City:	Duluth
	State:	GA
	ZIP Code:	30099
10	Full Name:	Kathryn E. Kieser
	Officer/Director:	Officer
	Officer's Title:	Senior Vice President
	Director's Title:	
	Business Address:	3100 Breckinridge Boulevard
	City:	Duluth
	State:	GA
	ZIP Code:	30099
11	Full Name:	John C. Norton
	Officer/Director:	Officer
	Officer's Title:	Senior Vice President
	Director's Title:	
	Business Address:	3100 Breckinridge Boulevard
	City:	Duluth
	State:	GA
	ZIP Code:	30099
12	Full Name:	Michael A. Lynch
	Officer/Director:	Officer
	Officer's Title:	Assistant Secretary
	Director's Title:	
	Business Address:	3120 Breckinridge Boulevard
	City:	Duluth
	State:	GA
	ZIP Code:	30099
13	Full Name:	Glenn J. Williams
	Officer/Director:	Officer, Director
	Officer's Title:	President
	Director's Title:	Director

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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Business Address:

3100 Breckinridge Boulevard

City:

Duluth

State:

GA

ZIP Code:

30099

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COLUMBIA, GEORGIA

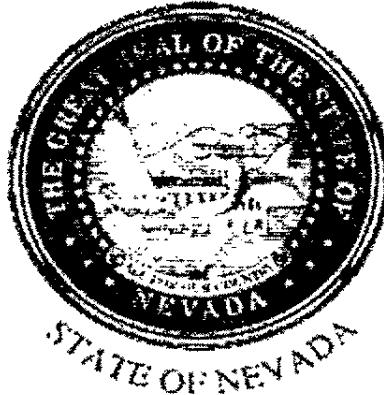
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TALLAHASSEE, FLORIDA

SECRETARY OF STATE



**CERTIFICATE OF EXISTENCE
WITH STATUS IN GOOD STANDING**

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **PRIMERICA FINANCIAL SERVICES, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 20, 1991, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 12, 2006.



Dean Heller

DEAN HELLER
Secretary of State

By

[Signature]
Certification Clerk

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CLERK OF STATE