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Florida Department of State
Division of Corporations
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To:

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From:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATIONBliss Insurance Services, Inc. *SK*
Per State

Certificate of Status	0
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Help

12/14/07

BISYS Insurance Services Limited Partnership
4250 Crums Mill Road
Harrisburg, PA 17112

December 12, 2007

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Consent to Use of Name

Dear Sir or Madam:

Please be advised that BISYS Insurance Services Limited Partnership hereby consents to the use of the name "BISYS Insurance Services, Inc." by BISYS Insurance Services, Inc., which will be filing an Application by Foreign Corporation for Authorization to Transact Business in Florida with the Division of Corporations using the foregoing name. Thank you for your help with this matter.

Sincerely,

BISYS Insurance Services Limited Partnership

By: 
Name: Andrew P. Forstenzer
Title: Vice President

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TALLAHASSEE, FLORIDA

SFNU1 1208341v1

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. BISYS Insurance Services, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Pennsylvania

(State or country under the law of which it is incorporated)

3. 23-2232460

(FEI number, if applicable)

4. 2/10/1983

(Date of incorporation)

5. Perpetual

(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. 4250 Crums Mill Road, Harrisburg, PA 17112

(Principal office address)

4250 Crums Mill Road, Harrisburg, PA 17112

(Current mailing address)

8. Insurance Services

(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

(City)

, Florida 33324

(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: Maria Ozaeta

(Registered agent's signature)

Maria Ozaeta

Vice President

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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Andrew Forstenzer

Address: 105 Eisenhower Parkway, Roseland, NJ 07068

Vice Chairman: S. Davison Obenshain

Address: 105 Eisenhower Parkway, Roseland, NJ 07068

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Brian Winkoff

Address: 105 Eisenhower Parkway, Roseland, NJ 07068

Vice President: Andrew Forstenzer

Address: 105 Eisenhower Parkway, Roseland, NJ 07068

Secretary: Ellen R. Dunkin

Address: 105 Eisenhower Parkway, Roseland, NJ 07068

Treasurer: Michael Galvin

Address: 105 Eisenhower Parkway, Roseland, NJ 07068

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. _____

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

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SECRETARY OF STATE

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

DECEMBER 7, 2007

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

BISYS INSURANCE SERVICES, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Pedro A. Cantis

Secretary of the Commonwealth

Certification Number: 7070374-1
Verify this certificate online at <http://www.corporations.state.pa.us/corp/soskb/verify.asp>

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HALLAN S. GEE, FLOOR 10