F07000006346

(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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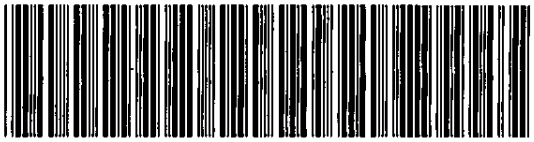

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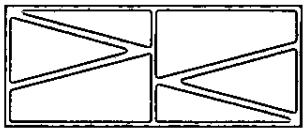

December 26, 2007

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Vetinsurance Managers, Inc.
Application for Authority to Transact Business in Florida

Dear Sir or Madam:

On behalf of Vetinsurance Managers, Inc., we hereby submit for your Department's review and approval the Florida-specific "Application by Foreign Corporation for Authorization to Transact Business in Florida" form to conduct business within your state. We propose that this become effective upon your Department's approval.

While researching the Florida requirements to obtain a Non-Resident Managing General Insurance Agent's License for Vetinsurance Managers, Inc., we became aware that we must first obtain your Department's approval to conduct business in Florida as a requirement in applying for the Non-Resident Managing General Insurance Agent's License.

In view of this, and as per your requirements, we respectfully submit the following:

1. A completed Florida-specific "Application by Foreign Corporation for Authorization to Transact Business in Florida;
2. A "Certificate of Good Standing" issued by the Arizona Corporation Commission, and
3. A check in the amount of $70.00 for the required application fee.

We trust that you will find this submission satisfactory and as such, look forward to your Department's early approval. Enclosed for your convenience in responding is a self-addressed, postage paid envelope.

Should you have any questions or require any additional information, please feel free to contact the undersigned.

Sincerely,

Howard L. Ryerson
Manager, Product Design & Licensing
Perr&Knight, Inc.
Phone: (201) 963-1550, ext. 105
Fax: (201) 963-1558
E-mail: hryerson@perrknight.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. Vetinsurance Managers, 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. Arizona
(State or country under the law of which it is incorporated)

3. 38-3756263
(FEI number, if applicable)

4. February 2, 2007
(Date of incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

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

7. 6505 216th St. SW, Bldg A, Suite 100, Mountlake Terrace, WA 98043
(Principal office address)

6505 216th St. SW, Bldg A, Suite 100, Mountlake Terrace, WA 98043
(Current mailing address)

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8. Insurance managing general agency.
(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: CT 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.

Sheila A McEvilly
(Registered agent's signature) Sheila McEvilly, 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: Darryl Rawlings

Address: 6505 216th St. SW, Bldg A, Suite 100
Mountlake Terrace, WA 98043

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Robert Jackson

Address: 6505 216th Street, Building A, Suite 100
Mountlake Terrace, WA 98043

Vice President: _____

Address: _____

Secretary: Louis P. Chames

Address: 6505 216th ST, Bldg A, STE 100, Mountlake Terrace, WA 98043

Treasurer: _____

Address: _____

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

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

14. Louis P. Chames, Secretary
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

STATE OF ARIZONA

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TALLAHASSEE, FLORIDA

Office of the

CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Brian C. McNeil, Executive Director of the Arizona Corporation Commission, do hereby certify that

****VETINSURANCE MANAGERS, INC.****

a domestic corporation organized under the laws of the State of Arizona, did incorporate on February 2, 2007.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said corporation is not administratively dissolved for failure to comply with the provisions of the Arizona Business Corporation Act; and that its most recent Annual Report, subject to the provisions of A.R.S. sections 10-122, 10-123, 10-125 & 10-1622, has been delivered to the Arizona Corporation Commission for filing; and that the said corporation has not filed Articles of Dissolution as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

SEAL OF THE ARIZONA CORPORATION COMMISSION
DITAT DEUS
1912

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 9th Day of November, 2007, A. D.

Executive Director

Order Number: 187295