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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

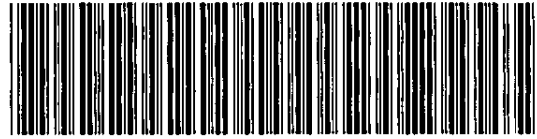
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CORPORATION SERVICE COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032
REFERENCE : 408371 7363511
AUTHORIZATION : *Spuddean*
COST LIMIT : \$ 70.00

ORDER DATE : January 18, 2008
ORDER TIME : 11:05 AM
ORDER NO. : 408371-005
CUSTOMER NO: 7363511

FOREIGN FILINGS

NAME: COMBINED GROUP INSURANCE
SERVICES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER: _____

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. Combined Group Insurance 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. Texas 3. 26-0681247
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 08, 2007 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. Suite 124, 1204 Tarpley Rd.
Carrollton, TX 75006
(Principal office address)

Suite 124, 1204 Tarpley Rd., Carrollton, TX 75006
(Current mailing address)

8. To engage in all lines of insurance-related business as an insurance broker. To engage in any act or activity for which corporations may be organized.
(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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.

Corporation Service Company
By: Deborah D. Skipper Deborah D. Skipper
(Registered agent's signature) Asst. V. Pres.

Assistant 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.

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

A. DIRECTORS

Chairman: See attached officers/directors rider

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached officers/directors rider

Address: _____

Vice President: _____

Address: _____

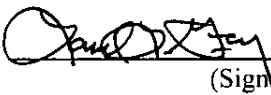
Secretary: _____

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. Laurel L. Grammig, Vice President _____
(Typed or printed name and capacity of person signing application)

COMBINED GROUP INSURANCE SERVICES

<u>Name</u>	<u>Office</u>
J. Powell Brown 220 S. Ridgewood Ave. Daytona Beach, FL 32114	Sole Director/ President
Laurel L. Grammig 3101 W. Martin Luther King, Jr., Blvd. Suite 400 Tampa, FL 33607	Vice President/Secretary
Carrie Robitaille 3101 W. Martin Luther King, Jr., Blvd. Suite 400 Tampa, FL 33607	Vice President/Assistant Secretary
Cory Walker 220 S. Ridgewood Ave. Daytona Beach, FL 32114	Vice President
Joe Failla 220 S. Ridgewood Ave. Daytona Beach, FL 32114	Treasurer

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



Phil Wilson
Secretary of State

Office of the Secretary of State

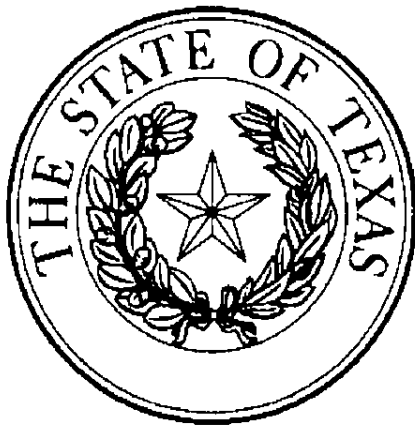
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Combined Group Insurance Services, Inc. (file number 800854913), a Domestic For-Profit Corporation, was filed in this office on August 08, 2007.

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

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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 January 29, 2008.



A handwritten signature in cursive script that reads "Phil Wilson".

Phil Wilson
Secretary of State