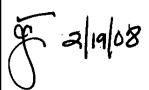
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SECRETARY OF STATE DIVISION OF COMPORATIONS

COVER LETTER

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	TO: New Filing Section Division of Corporations				
	SUBJECT: The Howard E. Nyhart Company Incorporate (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: Lisa Pethtel				
	(Name of Person)				
	The Howard E. Nyhart Company Incorporated (Firm/Company)				
	9320 Priority Way West Drive				
Indianapolis, IN 46240 (City/State and Zip code)					
For further information concerning this matter, please call:					
Lisa Pethtel at (317) 803-7723 (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 & \$78.75 Filing Fee & Certificate of Status Certified Copy \$87.50 Filing Fee, 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. The Howard E. Nyhart Company, Incorporated (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) Indiana
(State or country under the law of which it is incorporated)

3. 35-0966414
(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Way West Orive Indianapolis, IN 46240
(Principal office address) (Current mailing address)

Retirement plan consulting administrative services
Section 125 Flex Administration

HR Consulting (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: Office Address: 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. of tregg few carelle. 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:

. DIRECTORS	
hairman: Dary (Dean	
hairman: Daryl Dean ddress: 9320 Pribrity Way West Drive Indianapo	lis IN 46240
ice Chairman:	
ddress:	08 FE
Pirector:	8 - 77
ddress:	<u> </u>
virector:	ST/TE 38/TIONS 12: 59
ddress:	
resident: <u>Thomas L. Totten</u> ddress: <u>9328 Priority Way West Drive Indiana</u>	polis, IN 46240
de President: Randolph A. Gomez. ddress: 9320 Priority Way West Drive Indianapo	15 TAL 111011A
ddress: 4320 Priarity Way West Drive Indianaso	713, <u>IN 46240</u>
ecretary: Charles D. Munsell III	
ddress: 9320 Priority Way West Drive Indianapoll reasurer: Lisa A. Pethtel	S, IN 46240
ddress: 9320 Priority Way West Drive Indianapa	1/is, IN 46240
OTE: If necessary, you may attach an addendum to the application listing additional office	cers and/or directors.
3. Signature of Director or Officer listed in number 12 of the application	
4. <u>Lisa A. Pethtel, Treasurer</u>	
(Typed or printed name and capacity of person signing application)	

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

THE HOWARD E NYHART COMPANY INCORPORATED

duly filed the requisite documents to commence business activities under the laws of State of Indiana on September 30, 1955, and was in existence or authorized to transact business in the State of Indiana on February 01, 2008.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this First Day of February, 2008.

Cost Kopita

TODD ROKITA, Secretary of State

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