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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
	,			
(Business Entity Name)	: :			
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(Document Number)				
Certified Copies Certificates of Status	! :			
	<u>.</u> :			
Special Instructions to Filing Officer:	ŀ			

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SECRETARY OF STATE

APPROVED AND



Education Assistance Services, Inc.

301 Sundance Parkway Round Rock, TX 78681

State of Florida FL Reg Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

RE: Education Assistance Services, Inc.

To Whom It May Concern:

Enclosed you will find our completed application.

Please mail all correspondence to:

Susan High Education Assistance Services, Inc. P.O. Box 6714 Round Rock, TX 78683-6714

If you have any questions regarding this application, please contact:

Susan High Education Assistance Services, Inc.

Phone: (512) 219-4723 Fax: (512) 219-2847

Email: susan.high@tgslc.org

Enclosures

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Education Assistance Services, inc.				
	poration - must include suffix)			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation" Certificate of Existence," and check are submitted transact business in Florida.	on for Authorization to Transact Business in Florida," ed to register the above referenced foreign corporation to			
Please return all correspondence concerning this	matter to the following:			
Susan High				
(Na	ame of Person)			
Educational Assistance Services, Inc.				
(Fig	rm/Company)			
301 Sundance Parkway				
	(Address)			
Round Rock, TX 78681				
(City/	State and Zip code)			
For further information concerning this matter, pl	lease call:			
Susan High at (512) 219-4723			
(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 Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & 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.

1. Education Assis	tance Services, inc.				
	orporation; must include "INCORPORAT! orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida	 ı)	
2. Texas	r		74-2748786	,	
_ · · _ · .	under the law of which it is incorporated)	₋ J.	(FEI number, if applicable)	_	
4. 05/25/1995		5.	Perpetual	_ _	
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	
6	(Data first transported bysaina		n Florida, if prior to registration)	_	
			502, F.S., to determine penalty liability)		
7. 301 Sundance P	arkway, Round Rock, TX 78681				
	(Principal office	addi	ress)		
PO Box 6714,	Round Rock, TX 78683-6714			-	
	(Current mailing	add	ress)		
8. Debt Collection	s of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)		
, , ,	et address of Florida registered agent: (60	,
Name:	C T Corporation System		CRE AHE		どって
Office Address:	1200 South Pine Island Road		AHASSEE	23 P	
	Plantation		, Florida <u>33324</u>	PH 2:	Cul Ti
	(City)		(Zip code)	UT UT	
10. Registered as	gent'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

Michele Miller
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: _____ Vice Chairman: Address: Director: Susan McMillin Address: 301 Sundance Parkway Round Rock, TX 78681 Director: _____ Address: _____ **B. OFFICERS** President: Susan McMillin Address: 301 Sundance Parkway Round Rock, TX 78681 Vice President: Address: _____ Secretary: Susan High Address: 301 Sundance Parkway, Round Rock, TX 78681 Treasurer: Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)

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

14. Jennifer Cleveland, pursuant to Power of Attorney

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



Hope Andrade 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, Articles Of Incorporation for EDUCATION ASSISTANCE SERVICES, INC. (file number 135647000), a Domestic For-Profit Corporation, was filed in this office on May 25, 1995.

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

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 May 20, 2009.

Hope Andrade

Come visit us on the internet at http://www.sos.state.tx.us/ Phone: (512) 463-5555 Prepared by: SOS-WEB

Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 258752740015

Secretary of State

Collectors Insurance Agency, Inc. Power of Attorney

NOTICE IS HEREBY GIVEN THAT Education Assistance organized under the laws of Texas , doe Cleveland, Robin Buendiger, Janis St. Martin and Insurance Agency, Inc. as attorney-in-fact for the esubsidiaries of the entity attached hereto as Exhibit ("the Subsidiaries") in the Entities' and Subsidiaries herein.	Is hereby appoint Catherine Ramstad, Jennifer Joleen Schwartz while employed by Collectors entity to act for the entity and affiliates and A, specifically organized herein by reference
The Entity and Subsidiaries, having taken all grants it's attorney-in-fact the power to execute the doct of authority, registrations, business registrations, licens of the Entity and Subsidiaries in any state, jurisdiction, t	es, permits and forms of similar import on behalf
This Power of Attorney expires when revoked b	by the Entity or Affiliates or Subsidiaries.
IN WITNESS WHEREOF, the undersigned have exec May, 20 09.	cuted this Power of Attorney on the 29 day of
	Sue memellen
	Signature of Authorized Entity Representative
	Sue McMillin, President
	Print Name and Title
Sworn to and subscribed before me this of May , 20_09.	
Notary Public, State of Texas	SECTIALL

KATHRYN BETROS

Notery Public, State of Texas My Commission Expires DEC, 4, 2009