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(Business Entity Name)

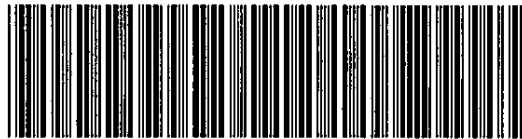
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16 JAN 13 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 25 2016
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 13, 2016

JAMES M DEREN
1736 E SUNSHINE #200
SPRINGFIELD, MO 65804 US

SUBJECT: GROUP BENEFIT SERVICES (GBS), INC.
Ref. Number: W16000002128

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TALLAHASSEE, FLORIDA

We have received your document for GROUP BENEFIT SERVICES (GBS), INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 216A00000889

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2016 JAN 25 AM 8:01
SECRETARY OF STATE

Group Benefit Services (GBS)

Employer Services (TPA) • Project Based Services • Outsourcing Services

**Plaza Towers Building • 1736 E. Sunshine, Ste. #200 • Springfield Missouri 65804
(800) 995-3569 • (417) 883-8088 • Fax (417) 883-8261**

January 8, 2016

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



Re: Registration of a Foreign Corporation (Missouri)

Dear *Sirs*:


I am writing today to submit a Registration of our corporation to the State of Florida for approval.

Attached hereto, you shall find the following documentation:

- *Cover Letter
- *Application by Foreign Corporation for Authorization to Transact Business in Florida
- *Certificate of Good Standing from the State of Missouri (Domicile State)
- *Check in the amount of \$87.50 that represents the following:
 - Filing Fee
 - Certification of Status
 - Certified Copy

If you have any questions, or need any clarifications or anything additional, please let me know and we will respond as quickly as possible.

Respectfully,


James M. Deren
President / CEO

Cc: *File*

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Deren Financial Group Incorporated

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," or "Certificate of Good Standing" 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:

James M. Deren

Name of Person
Deren Financial Group Incorporated
Firm/Company
1736 E Sunshine #200
Address
Springfield, MO 65804-1328
City/State and Zip code
James.Deren@gbs-tpa.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL

For further information concerning this matter, please call:

Name of Person	Area Code	Daytime Telephone Number
James M. Deren	417	848-2473

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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 & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, 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. Deren Financial Group Incorporated
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- Deren Financial Group Incorporated dba Group Benefit Services, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Group Benefit Services (GBS) 3. 43-1770779
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 3, 1997 5. Perpetual
(Date of incorporation) (Date of duration, if other than 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. 1736 E Sunshine #200, Springfield, MO 65804-1328
(Principal office address)
- Same
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: URS Agents, LLC

Office Address: 1540 Glenway Drive

Tallahassee, Florida 32301
(City) (Zip code)

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FLORIDA

9. 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.

URS Agents, LLC

by: Christian Eubanks

Christian Eubanks, Assistant Secretary
(Registered agent's signature)

10. 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.

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

A. DIRECTORS

Chairman: N/A

Address: N/A

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: James M. Deren

Address: 1736 E Sunshine #200, Springfield, MO 65804-1328

Vice President: _____

Address: _____

Secretary: James M. Deren

Address: 1736 E Sunshine #200, Springfield, MO 65804-1328

Treasurer: _____

Address: _____

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

12. James M. Deren

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. James M. Deren, President / CEO

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

STATE OF MISSOURI



Jason Kander
Secretary of State

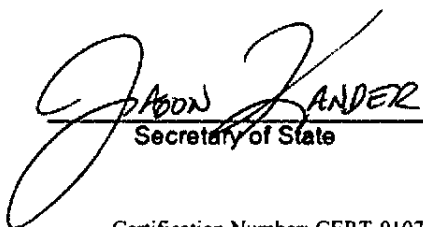
CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

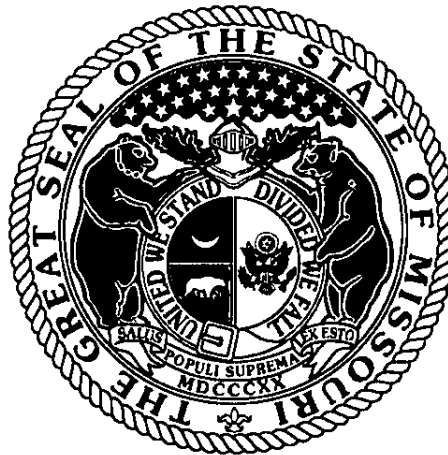
DEREN FINANCIAL GROUP INCORPORATED
00435402

was created under the laws of this State on the 1st day of January, 1997, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 7th day of January, 2016.


Secretary of State

Certification Number: CERT-01072016-0107



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TALLAHASSEE, FLORIDA