Qualification/Tax Lien Section

Division of Corporations

TO:

SUBJECT: Insurance Mass Marketing Systems, Inc. (Name of corporation - must include suffix)	
Dear Sir or Madam:	300001811503 -05/07/9601110004 ******70,00 ******70,00
The enclosed "Application by Foreign Corporation for Authorization to The Florida", "Certificate of Existence", and check are submitted to register the foreign corporation to transact business in Florida.	Fransact Business in he above referenced
Please return all correspondence concerning this matter to the following:	
Jenn_Repertson(Name of Person)	
Insurance Mass Marketing Systems, Inc. (Firm/Company) 14673 Midway Road, Suite 220	SECRETARY DIVISION OF C
(Address) Dallas, Tex ., 75244 (City/State/Zip)	PHI2: 29
Should you need to call someone concerning this matter, please call:	inth
Jean Robertson at (214 (Name of Person) (Area Code & D) 458-2833 Ext.#224 Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

. 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 ST. IE OF FLORIDA:

1. Indurance Mann Marketing Systems. T (Name of corporation: must include the word "INCORPOR abbreviations of like import in language as will clearly indic person or partnership if not so contained in the name at pre-	IIC. ATED", "COMPANY", "CORPORATION" and that it is a corporation instead of a natural sent.)	or word	la or
2. Texas (State or country under the law of which it is incorporated)	3. 75-2370726 (FBI number, if applicab		· · · · · · · · · · · · · · · · · · ·
4. December 1084 (Date of Incorporation)	5. <u>parmetual</u> (Duration: Year corp. will cease to exist o	r "perp	ctuai")
6. N/A (Date first transacted business in Florida. (SEE SECTIONS 14673 Midway Road, Suite 220 7. Dallas, Texas 75244		95 HAY -6	SECRETAR BIVISION OF
(Current mailin	g address)	PH 12:	RRY OF ST
8. Stop Loss Insurance (Purpose(s) of corporation authorized in home state or country Florida)	y to be carried out in the state of	29	1085
9. Name and street address of Florida registered acceptable) Name: Gregor R. H. Gregory		k NO]	C .
Office Address: 7901 S.W. 36th Street, St	uite 100		
Davie 10. Registered agent's acceptance:	, Florida ,33328 (Zip Code)		
Having been named as registered agent and to accept corporation at the place designated in this application registered agent and agree to act in this capacity. It all statutes relative to the proper and complete performed accept the obligations of my position as registered agent. (Registered agent 11. Attached is a certificate of existence duly authent delivery of this application to the Department of Sofficial having custody of corporate records in the incorporated.	on, I hereby accept the appointment further agree to comply with the programmence of my duties, and I am familied agent. Signature icated, not more than 90 days prior to the by the Secretary of State by the Secretary of Stat	as vision liar wi	s of th

12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: Robert T. Hensinkvled Address: 14673 Midway Road, Suite 220, Dallan, Texas 75244 Vice Chairman: None Address: Director: Address: Director: _____ Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Robert T. Heusinkvled Address: 14673 Midway Road, Suite 220 Dallas, Texas 75244 Vice President: None Address: _____ Secretary: Robert T. Heusinkveld Address: 14673 Midway Road, Suite 220 Dallas, Texas 75244 Treasurer: _____ Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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

14. ____ Robert T. Heusinkvled



The State of Texas

SECRETARY OF STATE

IT IS HEREBY CERTIFIED, that Articles of Incorporation of

INSURANCE MASS MARKETING SYSTEMS, INC. CHARTER# 1186096

were filed in this office and a certificate of incorporation was issued on MARCH 18, 1991;

IT IS FURTHER CERTIFIED, that no certificate of dissolution has been issued, and that the corporation is still 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 the City of Austin, on April 17, 1996.

Automio a Gaza to

Antonio O. Garza, Jr. Secretary of State

BAM