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CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

700001936567  
-08/30/96--01022--022  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

CORPORATION(S) NAME

Educational Insurance Corporation

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DIVISION OF CORPORATIONS

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☐ NonProfit  
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Lee +/or Mike :

Please see the attached  
note labeled "Special Instructions"

Thank you!

Tamara /CT

CT CORPORATION SYSTEM

AUG 30 1996

818 West Seventh Street  
Los Angeles CA 90017  
Tel 213 627 8252  
Fax 213 614 9347

August 29, 1996

Ms. Connie Bryan  
C T CORPORATION SYSTEM  
660 East Jefferson Street  
Ground Floor  
Tallahassee, Florida 32301

Re: **EDUCATIONAL INSURANCE CORPORATION**  
**Arizona Domestic**  
Order #: 482306

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DIVISION OF CORPORATIONS  
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Dear Connie:

We request your assistance in filing a **Application for Certificate of Authority** for the above named corporation with the Secretary of State of Florida on an expedited basis.

As soon as the document is filed, please **fax** me with confirmation of the filing. Evidence of the filing should be forwarded to my attention by regular mail.

If you have any questions regarding this filing, please call our toll-free number: 800-888-9207 Ext 3206.

Very truly yours,

  
Juli Pena  
Customer Specialist

Enclosure(s)

1. Duplicate originals of the form
2. Good Standing Certificate and Cert copy of Articles if needed to prove that this has been approved as a regular corporation in Arizona
3. Check for \$195.00

Lee +/or Mike

**Special Instructions:** Please note on your cover letter to the state that this corporation, even though classified as an insurance corporation in Arizona, it will not sell or underwrite any type of insurance in Florida. Also indicate the ~~the Certificate of Authorization and Deposit is the~~ equivalent of the Good Standing Certificate from the Department of Insurance, and that the Arizona Corporation Commission does not issue Good Standing Certificates for insurance companies.

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION  
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. EDUCATIONAL INSURANCE CORPORATION

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Arizona

(State or country under the law of which it is incorporated)

3. 86-0805639

(FEI number, if applicable)

4. October 6, 1995

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))

7. 12636 HIGH BLUFF DRIVE, SUITE 100, SAN DIEGO, California 92130

(Current mailing address)

8. See attached purpose clause

(Purpose(s) of corporation authorized in home state; country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine  
Island Road

Plantation, Florida, 33324

(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System



(Registered agent's signature) (Officer)

Thomas B. Connolly, Assistant Secretary  
(Type Name and Title of Officer)

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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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Director: see attached list of directors

Address: \_\_\_\_\_

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

B. OFFICERS

President: see attached list of officers

Address: \_\_\_\_\_

\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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DIVISION OF CORPORATIONS  
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Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. DOUGLAS L. FEIST, Secretary

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

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Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Purpose Clause of  
EDUCATIONAL INSURANCE CORPORATION**

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The purpose for which this corporation is organized is the transaction of any or all lawful business for which corporations may be incorporated under the laws of the State of Arizona, including the marketing of federally authorized guaranteed Title IV educational loans to parents and students

Specifically, this corporation will not sell nor underwrite any type of insurance in the state of Florida, nor engage in any business related to an insurance company.

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Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Directors of  
EDUCATIONAL INSURANCE CORPORATION**

---

1. ROBERT DEROSE  
12636 HIGH BLUFF DRIVE, SUITE 100  
SAN DIEGO, California 92130
2. DANIEL J. GREENBERG  
12636 HIGH BLUFF DRIVE, SUITE 100  
SAN DIEGO, California 92130
3. DOUGLAS L. FEIST  
12636 HIGH BLUFF DRIVE, SUITE 100  
SAN DIEGO, California 92130
4. ALAN J. MEISTER  
12636 HIGH BLUFF DRIVE, SUITE 100  
SAN DIEGO, California 92130
5. REBECCA A. FORSYTHE  
12636 HIGH BLUFF DRIVE, SUITE 100  
SAN DIEGO, California 92130

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Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Officers of  
EDUCATIONAL INSURANCE CORPORATION**

---

1. ROBERT DEROSE, PRESIDENT  
12636 HIGH BLUFF DRIVE, SUITE 100  
SAN DIEGO, California 92130
2. DANIEL J. GREENBERG, VICE PRESIDENT  
12636 HIGH BLUFF DRIVE, SUITE 100  
SAN DIEGO, California 92130
3. DOUGLAS L. FEIST, SECRETARY  
12636 HIGH BLUFF DRIVE, SUITE 100  
SAN DIEGO, California 92130
4. ALAN J. MEISTER, CHIEF FINANCIAL OFFICER  
12636 HIGH BLUFF DRIVE, SUITE 100  
SAN DIEGO, California 92130

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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STATE OF



ARIZONA

**DEPARTMENT OF INSURANCE**  
**CERTIFICATE OF AUTHORIZATION AND DEPOSIT**

I, **JOHN KING**, Director of Insurance of the State of Arizona, do hereby certify that

**EDUCATIONAL INSURANCE CORPORATION**  
Domiciled in Arizona  
NAIC NO. 60073

is duly organized under the laws of the State of Arizona and is authorized, subject to the provisions thereof and the charter powers of said company, to transact the business of:

**LIFE & DISABILITY REINSURANCE**

within the State of Arizona until terminated at the request of the insurer or suspended or revoked by the Director of Insurance.

I **FURTHER CERTIFY** that said company, on the date of this certificate had on deposit with the Treasurer of the State of Arizona, as evidenced by the records of this office, securities in the amount of:

**\$100,000.00**

for the protection of all the insurer's policyholders within the United States.

In **TESTIMONY WHEREOF**, I have hereunto set my hand and affixed the official seal of the Director of Insurance at the City of Phoenix. The effective date of this Certificate is August 20, 1996.



*John King*  
John King  
Director of Insurance

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CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

200002246572--6

-07/24/97--01060--019

\*\*\*\*\*35.00 \*\*\*\*\*35.00

CORPORATION(S) NAME

Educational Insurance Corporation  
changing its name to:

American Express Educational Assurance Company

☐ Profit

☐ NonProfit

☐ Limited Liability Co.

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Certified Copy

☐ Call When Ready

☒ Walk In

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☒ Amendment

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APPLICATION BY FOREIGN CORPORATION TO FILE AMENDMENT TO  
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN  
FLORIDA

FILED  
97 JUL 24 PM 2:11  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

SECTION I (1-3 must be completed)

1. EDUCATIONAL INSURANCE CORPORATION  
Name of corporation as it appears within the records of the Department of State.

2. Incorporated under laws of: Arizona

3. Date authorized to do business in Florida: August 30, 1996

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation?

June 16, 1997


5. Name of corporation after the amendment, adding suffix "corporation," "company," "incorporated," or appropriate abbreviation, if not contained in new name of the corporation:

AMERICAN EXPRESS EDUCATIONAL ASSURANCE COMPANY

6. If the amendment changes the period of duration, indicate new period of duration.

No Change

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.



Signature  
Name and Title

DOUGLAS L. FEIST, Secretary

July 11, 1997  
Date

# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETING:

I, JACK ROSE, EXECUTIVE SECRETARY OF THE ARIZONA CORPORATION COMMISSION, DO HEREBY CERTIFY THAT THE RECORDS IN THIS OFFICE SHOW EDUCATIONAL INSURANCE CORPORATION WAS INCORPORATED ON THE 6TH DAY OF OCTOBER, 1995.

I FURTHER CERTIFY THAT EDUCATIONAL INSURANCE CORPORATION CHANGED THE NAME OF THEIR CORPORATION TO AMERICAN EXPRESS EDUCATIONAL ASSURANCE COMPANY ON THE 16TH DAY OF JUNE, 1997, AS PROVIDED BY LAW.

IN WITNESS WHEREOF, I have hereunto  
set my hand and affixed the official  
seal of the Arizona Corporation  
Commission. Done at Phoenix, the  
Capital, this

16TH day of JULY

19 97, A.D.



*Jack Rose*  
EXECUTIVE SECRETARY

BY *Michelle Boyer*