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Duncanson & Holt Group

December 10, 1996

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

90002028463--1 12/13/96--01030--013 ****131.25 ****131.29

RE: Duncanson & Holt Administrative Services, Inc.
Application for authorization to transact business as a foreign corporation

Dear Sir/Madam:

On behalf of Duncanson & Holt Administrative Services, Inc., I am submitting a completed application for authorization to transact business in Florida. Also enclosed are:

- a completed transmittal letter.
- an original Certificate of Good Standing from our state of incorporation, Delaware.
- a check in the amount of \$131.25 payable to the Florida Department of State for the registration fee and a certified copy of our certificate of status.

Please contact me if any additional information is required.

Thank you.

Sincerely,

David Bavelas Administrator

(860) 409-3310

SECRETARY OF STATE DIVISION OF CORPORATION 96 DEC 13 PH 4: 16

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TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

COURIER ADDRESS:

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

	(Name of corporation - must inc	lude suffix)			
Dear Sir or Madan	1:	•		•	
Florida", "Certific	oplication by Foreign Corporat ate of Existence", and check n to transact business in Florids	are submitted	rization to Tra to register the	nsact Busir abova refe	ness rence
Please return all co	prrespondence concerning this (matter to the f	ollowing:		
·	David Bavelas				Sign di Sign
	(Name of Person)			မ္တ	
× .	Duncanson & Holt Group			品	
	(Firm/Company)			· · · · · · · · · · · · · · · · · · ·	
	90 Avon Meadow Lane			. ω	8
•	(Address)			₽.	경우이
	Avon, C7 06001				SIA AIS
	(City, State and Zip Code)			5	
					<i>i, i,</i> 13
Should you need to	o call someone concerning this	matter, pleas	e call:		
Should you need to	o call someone concerning this at (⁸⁶⁰		9 call: 310		

MAILING ADDRESS:

Qualification/Tax Lien Sec. 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 STATE OF FLORIDA:

1. Duncanson & Rolt Administrative Services. (Name of corporation: must include the word INCORPOR/ abbreviations of like import in language as will clearly indic or partnership if not so contained in the name at present.)	ATED", "COMPANY", "CORPORATION" or words or sate that it is a corporation instead of a natural person
m.1	06-1460792
2. Delaware (State or country under the law of which it is incorporated)	(FEI number, if applicable)
	Perpetual
4. (Date of Incorporation) (Dura	ation: Year corp. will cease to exist or "perpetual")
6. March 1, 1997 (Date first transacted business in Florida. (See sections 607.1)	501, 607,1502, and 817,155, F.S.)
7. 90 Avon Meadow Lane	
Avon, Cr 06001	95 Vss
(Current malling address)	DEC DECEMBER
g Third Party Administrator to Insurance Con	
9. Name and street address of Florida regist	tered agent:
Name: <u>Insurance Commissi</u>	<u>,0/ler</u>
Office Address:Capitol	
Tallahassee	, Florida , <u>32399-0300</u> (Zip Code)
10. Registered agent's acceptance: Having been named as registered agent and to corporation at the place designated in this ap registered agent and agree to act in this capaci of all statutes relative to the proper and comple with and accept the obligations of my position a	ity. I further agree to comply with the provisions etc performance of my duties, and I am familiar
Insurance Commission (Registered agent's si	er gnature)
11. Attached is a certificate of existence duly delivery of this application to the Department of having custody of corporate records in the jurisc	y authenticated, not more than 90 days prior to State, by the Secretary of State or other official diction under the law of which it is incorporated.

Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) DIRECTORS (Street address only- P. O . Box NOT acceptable) Gary Loo Corlies Chairman: _ 90 Avon Meadow Lane Address: Avon, Cl 06001 Vice Chairman: Barbara Ann Prescott 90 Avon Meadow Lane Address: _____ Avon, Cr 06001 Frederick John Cronin Director: ____ Address: . One City Place Portland, ME 04101 Director: _____ Address: ___ B.OFFICERS (Street address only- P. O. Box NOT acceptable) President: __ Gary Lee Corliss 90 Avon Meadow Lane Address: ____ Avon, Cl 06001 Vice President: N/A Address: __ Secretary: Barbara Ann Prescott 90 Avon Meadow Lane Address: Avon, CT 06001 Treasurer: ____N/A Address: __ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Chairman, Vice Chairman, or any officer listed in number 12 of the application) Gary Corliss, President

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

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DUNCANSON & HOLT ADMINISTRATIVE SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE TWENTY-FOURTH DAY OF OCTOBER, A.D. 1996.



AUTHENTICATION: 8160345

> DATE: 10-24-96

8300 2638483 960306827

Duncanson & Holt Administrative Services, Inc.

A Duncanson & Holt Group Company

000065 July 27, 199

Ms. Carol Mustain Corporate Specialist Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

RE: Duncanson & Holt Administrative Services, Inc. Change of Registered Agent

Dear Ms. Mustain:

Enclosed is a completed Statement of Change of Registered Office/Agent and a check for the filing fee of \$35.00.

Thank you.

Sincerely,

David Bayelas LTC Administrator (860) 409-3310

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Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

. — — » S/Ru Cu	provisions of sections 607.0502, poration organized under the laws	to the State of Dolay	17.1508, Florida Statutes, the
andmis the Joll	owing statement in order to cham	re its registered office or re	gistered agent, or both, in the
	the corporation is: Duncanson a		
	and corporation is:	Holt Administrative B	ervices, Inc.
2. The mailing a	ddress of the corporation is: 90	Avon Meadow Lane, Avo	n, CT 06001-3774
3. Date of incorp 4. The name and	poration/qualification:	, 1996 Document m	umber:2638483
•	Insurance Commiss	ioner	
	Florida Departmen	t of Insurance	
5. The name and	address of the new registered age Corporation Servi		ot Acceptable) 97
•	1201 Hays Street	 	
•	Tallahasee, FL 3		
suthorized by the	ss of its registered office and the st 4, will be identical. suthorized by resolution duly ado	pted by its board of directo	s office of its registered ors or by an officer so
(er, chairman or vice cheirs as of the board	, ,)
	Barbara Pr (Printed or ty	escott, Secretary ped name and title)	· · · · · · · · · · · · · · · · · · ·
Muni	red as registered agent and to accure appointment as registered agent was risions of all statutes relative to with and accept the obligation of	tpt service of process for to and agree to act in this cont the proper and complete my position as registered	he above stated corporation, apacity. I further agree to performance of my auties, agent.
(Signme of Signing on beh	PRODUCTION Agent)	(Date)	/-/-/-
(Typed or P	WV/ Mienen	AS57	pecity)

CR2E045(1/95)