

F980000056 32

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Alpine Agency, Inc.
(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", 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:

500002616135--1
-08/14/98--01044--001
*****78.75 *****78.75

Stewart B. Samples
(Name of Person)
Blue Cross and Blue Shield of S.C.
(Firm/Company)
I-20 at Alpine Rd
(Address)
Columbia, SC 29219
(City/State/Zip)

W98-18543

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9/10/98

Should you need to call someone concerning this matter, please call:

Stewart Samples at (800) 288-2227 x44258
(Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section
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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

August 14, 1998

STEWART B. SAMPLES
BLUE CROSS AND BLUE SHIELD OF S.C.
I-20 AT ALPINE RD.
COLUMBIA, SC 29219

SUBJECT: ALPINE AGENCY, INC.
Ref. Number: W98000018543

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We have received your document for ALPINE AGENCY, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The certificate of existence that we require is issued by the Secretary of State's Office, not the Department of Insurance.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6095.

Jennifer Sindt
Document Examiner

Letter Number: 198A00042291

**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. Alpine Agency, Inc.
(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. South Carolina
(State or country under the law of which it is incorporated)
3. 57-0524105
(FEI number, if applicable)
4. 1970
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. N/A
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 2501 Faraway Drive, Suite AF-G05
Columbia, SC 29219-0001
(Current mailing address)
8. Solicit life and health insurance products
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: Patrick A. Artz
Office Address: 120 University Park Dr. #230
Winter Park, Florida, 32792
(Zip code)

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10. 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.


(Registered agent's signature)

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: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: M. Ed Sellers

Address: I-20 East at Alpine Road
Columbia, SC 29219

Vice Chairman: N/A

Address: _____

Director: Tom Faulds

Address: I-20 East at Alpine Road
Columbia, SC 29219

Director: N/A

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Jim Hart

Address: I-20 East at Alpine Road
Columbia, SC 29219

Ex. Vice President: William H. Ferguson

Address: I-20 East at Alpine Road
Columbia, SC 29219

Secretary: Vivian Gray

Address: I-20 East at Alpine Road
Columbia, SC 29219

Treasurer: Robert Leichte

Address: I-20 East at Alpine Road
Columbia, SC 29219

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

13. William H. Ferguson

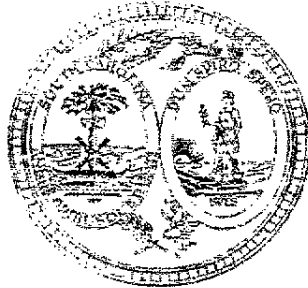
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William H. Ferguson, Executive Vice President and C.O.O.

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

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The State of South Carolina



Office of Secretary of State Jim Miles **Certificate of Existence**

I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

ALPINE AGENCY INCORPORATED,

a corporation duly organized under the laws of the State of South Carolina on **April 15th, 1970**, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of
the State of South Carolina this 3rd day of
September, 1998.

A handwritten signature of Jim Miles in cursive script, written over a horizontal line.

Jim Miles, Secretary of State

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Note: This certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Carolina Tax Commission or whether the Corporation has filed the annual report with the Tax Commission. If it is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has filed the annual reports, a certificate of compliance must be obtained from the Tax Commission.