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Florida Department of State

Division of Corporations

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Account Number : 075201001473
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Fax Number : (561)655-6222

FOREIGN PROFIT QUALIFICATION

Simplified Insurance, Inc.

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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. SIMPLIFIED INSURANCE, 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. Delaware
(State or country under the law of which it is incorporated)

3. "applied for"
(FEI number, if applicable)

4. April 19, 1999
(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 817.155, F.S.)

7. 4805 Queen Palm Lane
Tamarac, FL 33319
(Current mailing address)

8. To engage in any lawful act or activity for which corporations may be organized under the laws of the United States and the State of Florida.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: Rita J. Cohen

Office Address: 4805 Queen Palm Lane

Tamarac, Florida, 33319
(Zip code)

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.

Rita J. Cohen
(Registered agent's signature)
Rita J. Cohen

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.**

Andrew F. Dunstan, Legal Assistant
Greenberg Traurig, P.A.
777 S. Flagler Dr., #300
W. Palm Beach, FL 33401
(561) 650-7941
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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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Stanley R. Cohen

Address: 4805 Queen Palm Lane
Tamarac, FL 33319

Director: _____

Address: _____

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

President: Stanley R. Cohen

Address: 4805 Queen Palm Lane
Tamarac, FL 33319

Vice President: Rita J. Cohen

Address: 4805 Queen Palm Lane
Tamarac, FL 33319

Secretary: Rita J. Cohen

Address: 4805 Queen Palm Lane
Tamarac, FL 33319

Treasurer: Rita J. Cohen

Address: 4805 Queen Palm Lane
Tamarac, FL 33319

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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. Stanley R. Cohen, 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 "SIMPLIFIED INSURANCE, 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 SHOW, AS OF THE TWENTY-SECOND DAY OF APRIL, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIMPLIFIED INSURANCE, INC." WAS INCORPORATED ON THE NINETEENTH DAY OF APRIL, A.D. 1999.

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Edward J. Freel, Secretary of State

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AUTHENTICATION: 9702095

DATE: 04-22-99