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CT Corporation System Requestor's Name 660 East Jefferson Str Address Tallahassee, FL 32301 City State Zip CORPORATIO	(850)222-1092 Phone		0 0298 0 09/08/99 *****70.00	-01051014
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CR2E031 (1-89)

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	UC Insurance Corporation	<u>ئے</u> م
1.	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words of 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.	Louisiana 3. 72-1450918 (State or country under the law of which it is incorporated) (FEI number, if applicable)	_
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	July 27, 1999 5. Perpetual	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6.	OPON qualifying	
Ο.	(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))	
7.	8549 United Plaza Blvd., Baton Rouge, Louisiana 70809	
	(Current mailing address)	
8.	Selling Credit Life Insurance (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	_
9.	Name and street address of Florida registered agent:	
	Name: C T Corporation System	
	C/o C T Corporation System, 1200 South Pine Office Address: Island Road	
	Plantation , Florida, 33324	
	(Zip Code)	
H d fi	O. Registered agent acceptance: aving been processed as the acceptance of the second agent acceptance. The place as the place as the second acceptance of the acceptance of the second agentance of the acceptance of the proper and complete performance of the proper of the proper and complete performance of the proper of	1
	C T Corporation System	
	Vita Dam	
	(Registered agent's signature) (Officer)	
	ASSISTANT SECRETARY	

(Type Name and Title of Officer)

(FL - 2189 - 11/16/94)

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: See attached list of directors Address: Vice Chairman: <u>see attached list of directors</u> Address: Director: See attached list of directors Address: _____ Director: Address: В **OFFICERS** President: See attached list of officers Address: Vice President: Address: Address: _____

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to

reasurer.	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional offi	cers
13. Mucual C. Solog (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	NOR PIC
14. Michael C. Balog, Secretary (Typed or printed name and capacity of person signing application)	

UC INSURANCE CORPORATION

OFFICER AND DIRECTOR LIST

Officers:

Name:

D. Richard Thompson

Title:

President

Home Address:

14 Valley Forge

Houston, TX 77024

Business Address: 11111 Wilcrest Green, Suite 250

Houston, TX 77042

Telephone:

800-991-5625

Name:

Michael C. Balog

Title:

Secretary/Treasurer

Home Address:

24126 Falcon Point Drive

Katy, TX 77494

Business Address: 11111 Wilcrest Green, Suite 250

Houston, TX 77042

Telephone:

800-991-5625

Director:

Name:

D. Richard Thompson

Title:

Director

Home Address:

14 Valley Forge

Houston, TX 77024

Business Address: 11111 Wilcrest Green, Suite 250

Houston, TX 77042

Telephone:

800-991-5625



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

UC INSURANCE CORPORATION

A LOUISIANA corporation domiciled at BATON ROUGE,

Filed charter and qualified to do business in this State on July 27, 1999,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

Sephember A. 199

CAS 34819291D

Secretary of State