C T CORPORATION SY	STEM .	000	· · ·		
Requestor's Name 660 East Jefferson	Street				
Address Tallahassee, FL 3 City State Z	2301 (<u>850</u>)222-1092 Phone	500	0030438 -11/15/9901 *****70.00	3 95 00 106000 *****70
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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 S SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN TH STATE OF FLORIDA:

- Settlement Options, 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 of or partnership if not so contained in the name at present.)
- 2. Illinois
 3. 13-3244872

 (State or country under the law of which it is incorporated)
 (FEI number, if applicable)

4. August 27, 1999 (Date of incorporation) 5. Perpetual

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

6. Upon filing

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))

7. <u>CNA Plaza</u> Chicago, IL 60685

(Current mailing address)

- 8. <u>To provide illustrations on structured settlements and any other purpose authorized</u> (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) under Florida statute.
- Name and street address of Florida registered agent:

Name: <u>C T Corporation System</u> C/O C T Corporation System, 1200 South Pine Office Address: <u>Plantation</u>, Florida, <u>33324</u> (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

(Type Nan

(FL - 2189 - 11/16/94)

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 of having custody of corporate records in the jurisdiction under the law of which it is incorporat 12. Names and addresses of officers and/or directors: A. DIRECTORS Chairman: <u>See attached list of directors</u> Address: _ Vice Chairman: See attached list of directors Address:_____ Director: <u>See attached list of directors</u> Address: Director: Address: B. **OFFICERS** President: <u>See attached list of officers</u> Address:

Vice President:

Address:

Secretary:_____

Address: _____

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	Treasurer:	<u> </u>
	Address:	NO STATE
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NOTI and/c	E: If necessary, you may attach an addendum to the directors.	ne application listing additional office s
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13.	Signature of Chairman, Vice Chairman, or any officer	

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14. <u>Mary A. Ribikawskis, Assistant Vice President & Secretary</u> (Typed or printed name and capacity of person signing application)

11/02/1999

Officers & Directors

Settlement Options, Inc.

Joel S. Feldman	Director
David L. Stone	Director
Susan C. Goulet	Director, Chairman of the Board & President
John J. Sullivan, Jr.	Group Vice President
Pamela S. Dempsey	Vice President & Treasurer
Marge George-Ratz	Vice President
Jeff D. Holley	Vice President
Jenny Lance	Vice President
Robert J. Grob	Assistant Vice President
Mary A. Ribikawskis	Assistant Vice President & Secretary



Business address for all directors and officers:

CNA Plaza Chicago, IL 60685



To all to whom these Presents Shall Come, Greeting:

In Testimony Whereof, I, hereto set



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SECRETARY OF STATE