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VESTA
INSURANCE COMPANIES

February 26, 2002

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

400005023564--3
-02/27/02--01037--005
****160.00 ****163.00

VIA FEDERAL EXPRESS

**RE: InsureOne Independent Insurance Agency, LLC
Foreign Limited Liability Company Registration to
transact business**

Dear Sir or Madame:

On behalf of InsureOne Independent Insurance Agency, LLC, an Illinois domiciled limited liability company and registered insurance agency, we respectfully request authority to transact business in the state of Florida. In support of this request, we submit the following:

- An executed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida,
- An executed Certificate of Designation of Registered Agent/Registered Office,
- An original Certificate of Existence from the Illinois Secretary of State along with certified copies regarding InsureOne Independent Insurance Agency, LLC and
- A check in the amount of \$160.00 for the filing fee.

Should you have any questions, please contact me at your earliest convenience. My direct line is 205-970-7136. Thank you for your cooperation and prompt attention to this matter.

Sincerely,

Anna Laurie Bryant
Anna Laurie Bryant
Corporate Counsel

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02 FEB 27 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

with
3/1

Enclosures

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. InsureOne Independent Insurance Agency, LLC
(Name of foreign limited liability company)
2. Illinois
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 36-4485332
(FEI number, if applicable)
4. 12/05/01
(Date of Organization)
5. perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. The company will transact business in Florida after authority to do so is granted.
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 1 South Wacker Drive, Suite 2710 Chicago, IL 60606
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

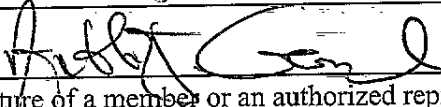
9. The name and usual business addresses of the managing members or managers are as follows:

W. Perry Cronin 3760 River Run Drive Birmingham, AL 35243

Arthur J. Gonzales 3760 River Run Drive Birmingham, AL 35243

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: "The transaction or any or all lawful business for which limited liability companies may be organized under this Act."
Business Code # 524210- Insurance Agencies & Brokerages


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Arthur J. Gonzales

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

InsureOne Independent Insurance Agency, LLC

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System

(Name)

1200 S. Pine Island Road

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Plantation

FL

33324

(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

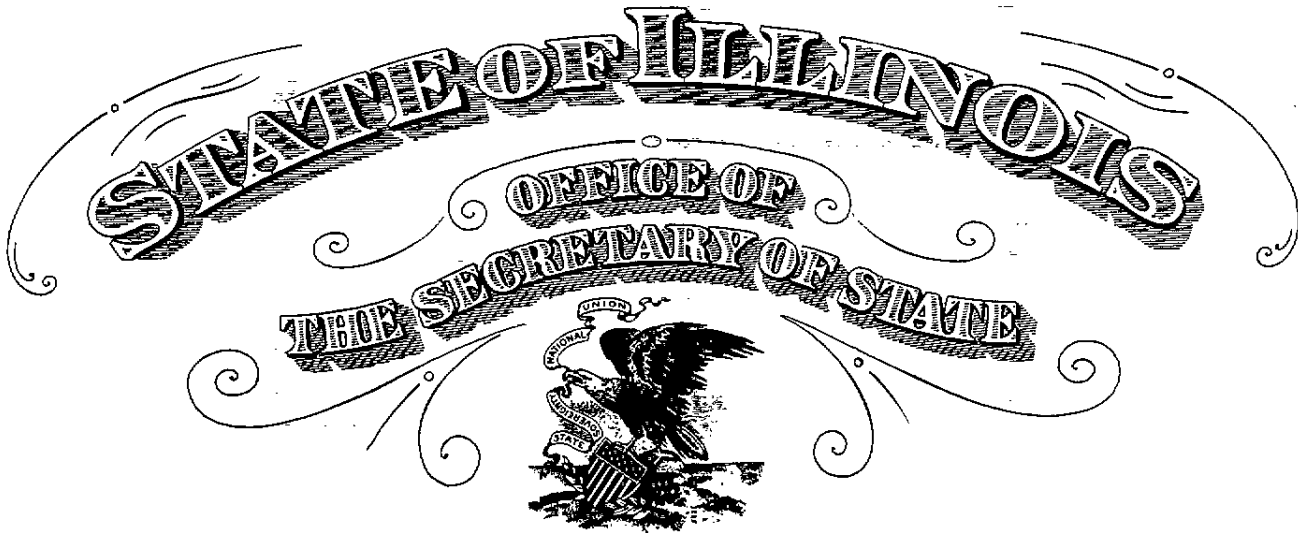
Dale W. Morris

(Signature)

DALE W. MORRIS
ASSISTANT VICE PRESIDENT

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

File Number 0063418-2

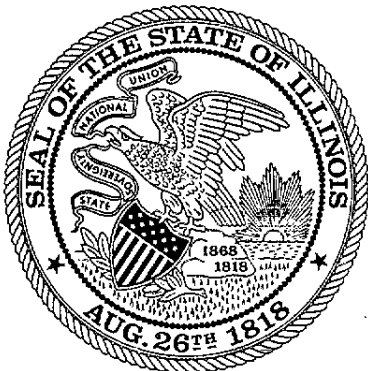


To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

INSUREONE INDEPENDENT INSURANCE AGENCY, LLC,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 05, 2001,
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING
OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT
BUSINESS IN THE STATE OF ILLINOIS.

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22 FEB 27 AM 8:44
SECRETARY OF STATE
ALABAMA, FLORIDA



*In Testimony Whereof, I, hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this* 7TH
day of FEBRUARY 2002
A.D.

Jesse White

SECRETARY OF STATE