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(Re	questor's Name)
(Ad	dress)
bA)	dress)
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	cument Number)
Certified Copies	_ Certificates of Status
Special Instructions to	Filling Officer:

Office Use Only



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DN SERVICE COMPANY	
ACCOUNT NO. : 07210000032	TEE 97
REFERENCE : 786503 7488902	碧山
AUTHORIZATION Smellelena	RSEC.FI
COST LIMIT : 0\$225.00	F10
ORDER DATE: March 5, 2007	RICE
ORDER TIME : 11:30 AM	
ORDER NO. : 786503-045	
CUSTOMER NO: 7488902	
FOREIGN FILINGS	
NAME: ACCENTURE INSURANCE SERVICES LLC	
XXXX QUALIFICATION (TYPE: <u>LL</u>)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	

EXAMINER: _____

CONTACT PERSON: Troy Todd -- EXT# 2940

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

IN COMPLIANCE WITH SECTION 608.503, FLO. LIMITED LIABILITY COMPANY TO TRANSACT BUS	RIDA STATUTES, TI SINESS IN THE STAT	HE FOLLOIVING IS SUBMITTED TO TEOFFLORIDA:	REGISTER A EOREIGN
Accenture Insurance Services LLC			· 是 ·
(Name of For	eign Limited Liabili	ty Company)	
2 Delaware	3. 0.	1-0885440	155 A
(Jurisdiction under the law of which foreign lim company is organized)	ited liability	(FEI number, if applicab	T. F. S.
4. 01/12/2007	5. pc	erpetual	- ·
(Date of Organization)	(Duration: Year limited liability company is to "perpetual")	any will cease to
6.			·
(Date first transacted (See sections 608.501 &	business in Florida, & 608.502 FS to de	if prior to registration) termine penalty liability)	
7. 161 N Clark Street, Chicago, IL 60601			
(\$	treet Address of Pri	ncipal Office)	
8. If limited liability company is a manag		manne aleana la barra [
6. If finited haofing company is a manage	er-managed com	pany, check here	
9. The name and usual business addresses	of the managing	s members or managers are as f	ollows:
Accenture LLP, 161 N. Clark Street, Chicago	, IL 60601		
	<u> </u>		
		······································	
			ŕ
400			
10. Attached is an original certificate of existence, no	more than 90 days of	ld, duly authenticated by the official hav	ing austody of records in
the jurisdiction under the law of which it is organized translation of the certificate under coath of the translato	(A photocopy is not	tacceptable. If the certificate is in a form	eign language, a
en Bauon Oi die Cenneae Linei Centor ne banbar.	i musi oc subtilliot,	†	
 Nature of business or purposes to be c 	onducted or pron	noted in Florida:	
Provide insurance business process of Confeing	and related service	S	
1/1/.		· · · · · · · · · · · · · · · · · · ·	^
- fan			
Signature of a member of a mem	per or an authoriz	zed representative of a member. execution of this document constitutes	
an affirmation under the p	enalties of perjury that	the facts stated herein are true)	
Accenture LLP, Member, represe	nted by Accenture In	nc., its Managing Partner, itself repres	sented by:

Typed or printed name of signee

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.

The na	me and the Florida street adda	ress of the registered agent and office are:	
	Corporation Service Comp	any	
		(Name)	·-
	1201 Hays Street		
	Florida Street	Address (PO Box NOT ACCEPTABLE)	
	Tallahassee	FL 32301	
		City/State/Zip	_

d 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, Florida Statutes.

Corporation Service Company Carol Dolor, By: Asst. VP (Signature)

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

Delaware

PAGE :

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ACCENTURE INSURANCE SERVICES LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF MARCH, A.D. 2007.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACCENTURE INSURANCE SERVICES LLC" WAS FORMED ON THE TWELFTH DAY OF JANUARY, A.D. 2007.

4284203 8300

070280342

Harriet Smith Hinden

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5479932

DATE: 03-05-07