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INC.

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| OXFORD INSURANCE | E SERVICES LLC | | |
|--|---|---|--|
| (Name of Force | ign Limited Liability Company; must | include "Limited Liability Company." "L.L | .C" or "LLC.") |
| Liability Company," "L.L.C," | ternate name adopted for the purpose of "LLC.") | of transacting business in Florida. The alter | nate name must include "Limited |
| 2. TEXAS | | 3. | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | (FEI number, If ap | plicable) |
| 4 UPON APPROVAL | | | |
| | (Date first transacted business (See sections 605.0904 & 605.09 | in Florida, if prior to registration.) 905, F.S. to determine penalty liability) | |
| 5 | | | - |
| 820 Gessner Road, Sui | te 1850, Houston, TX 77024 | | |
| | (Street Address of Pri | ncipal Office) | |
| 6 | | | |
| 820 Gessner Road, Sui | te 1850, Houston, TX 77024 | | |
| | (Mailing Ad | dress) | mg m |
| 7. Name and street addres | s of Florida registered agent: (P.O | Box NOT acceptable) | |
| Name: | REGISTERED AGENT SOLUT | IONS, INC. | OF 2: |
| Office Address: | 155 Office Plaza Dr. Suite A | | Ś., ń |
| | Tallahassee | , Florida 32301 | · |
| Basista and a second a second | (City) | (Zip c | ode) |
| designated in this applica- to complywith the provision | gistered agent and to accept servic tion, I hereby accept the appointm | e of process for the above stated limit ent as registered agent and agree to a roper and complete performance of m Jaclyn Wright, Asst. So | ct in this capacity. I further agree y dutles, and I am familiar with and |
| | Register | od agent's signature) | |
| 8. The name, title or capa | city and address of the person(s) w | no has/have authority to manage is/are | • |
| William F. Galtney-(Man | ager/Member) - 820 Gessner Road | Suite 1850, Houston, TX 77024 | |
| P. Matthew Galtney-(Mar | nager/Member) - 820 Gessner Ros | nd, Suite 1850, Houston, TX 77024 | |
| Charu Verma - (Member |)-820 Gessner Road, Suite 1850, H | ouston, TX 77024 | |
| O Americal in a consistence | | | |
| y. Attached is a certificate jurisdiction under the law of the translator must be su | of which it is organized. (If the certabrillar) | old, duly authenticated by the official lificate is in a foreign language, a transl | having custody of records in the lation of the certificate under oath |
| | | an authorized person | |
| This document is executed submitted in a document to | in accordance with section 605.02 the Department of State constitute | 03(1) (b), Florida Statutes. I am aware s'a mird degree felony as provided for i | that any false information in s.817.155, F.S. |
| | P. Matthew Galtney, Manager | • | |

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Conversion for Oxford Insurance Services LLC (file number 802459193), a Domestic Limited Liability Company (LLC), was filed in this office on May 16, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 16, 2016.



Carlos H. Cascos Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 684964140004