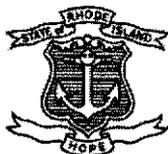


Filing Fee: \$150.00

ID Number: _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:

Insurance Specialty Group, LLC

2. The name, if different, under which it proposes to register and transact business in Rhode Island is:

3. The limited liability company is organized under the laws of Georgia

4. The date of its organization is May 5, 2003

5. The period of duration of the limited liability company is (if perpetual, so state) Perpetual

6. The address of the limited liability company's resident agent in Rhode Island is:

222 Jefferson Blvd Warwick, RI 02888
(Street Address, not P.O. Box) (City/Town) (Zip Code)

and the name of the resident agent at such address is National Corporate Research, Ltd
(Name of Agent)

7. The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

8. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:
2470 Satellite Blvd, Ste 130, Duluth, GA 30096

9. The mailing address for the limited liability company is:
2470 Satellite Blvd, Ste 130, Duluth, GA 30096

RECEIVED
CORPORATIONS DIVISION
JUL 21 2008
10:11 AM

FILED

JUL 21 2008

By DS 11:07
W3873

10. Management of the Limited Liability Company:

A. The limited liability company is to be managed by its members. *(If you have checked this box, go to item no. 11.)*

or

B. The limited liability company is to be managed by one (1) or more managers. *(If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)*

| <u>Manager</u> | <u>Address</u> |
|----------------|----------------|
| | see attached |
| | |
| | |
| | |
| | |
| | |

11. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 7/16/08

Insurance Specialty Group, LLC

Print Exact Name of Limited Liability Company Making Application

By B. Starnell

Signature of authorized person

Insurance Specialty Group, LLC

Manager Information

Bruce Harrell

Address: 2470 Satellite Blvd., Ste 130, Duluth, GA 30096

Randolph Roppelt

Address: 2470 Satellite Blvd., Ste 130, Duluth, GA 30096

Michael J. Murphy

Address: 2470 Satellite Blvd., Ste 130, Duluth, GA 30096

Robert Bonham

Address: 2470 Satellite Blvd., Ste 130, Duluth, GA 30096

Charles Nail

Address: 2470 Satellite Blvd., Ste 130, Duluth, GA 30096

Charles Norton-Smith

Address: 2470 Satellite Blvd., Ste 130, Duluth, GA 30096

Jim Leach

Address: 2470 Satellite Blvd., Ste 130, Duluth, GA 30096

Control No. 0325781

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

INSURANCE SPECIALTY GROUP, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 05/05/2003 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 10th day of July, 2008

Karen C Handel
Secretary of State



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly
executed in accordance with the provisions of Title 7 of the General Laws
of Rhode Island, as amended, has been filed in this office on this day:

A handwritten signature in black ink that reads "A. Ralph Mollis".

A. RALPH MOLLIS

Secretary of State

