

Filing Fee: \$150.00

ID Number: 160337



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

FILED

DEC 11 2006

By ADK
129598

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:

ALLIANT INSURANCE SERVICES HOUSTON, 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 DELAWARE

4. The date of its organization is March 31, 2000

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., Suite 200

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 Registered Agents, Inc.

(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:

160 Greentree, Ste 101

Dover, DE 19904

9. The mailing address for the limited liability company is:

5847 SAN FELIPE, STE 2750

HOUSTON, TX 77067

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SECRETARY OF STATE
CORPORATIONS DIV.
2006 DEC - 11 PM 1:50

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SECRETARY OF STATE
CORPORATIONS DIV.
2006 DEC 11 PM 12:30

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>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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

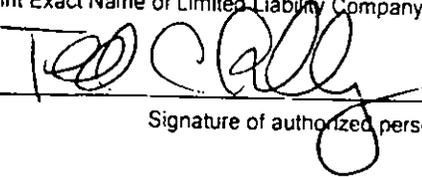
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 12-5-06

ALLIANT INSURANCE SERVICES HOUSTON, LLC - MEMBER

Print Exact Name of Limited Liability Company Making Application

By



Signature of authorized person

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALLIANT INSURANCE SERVICES HOUSTON, 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 TWENTY-NINTH DAY OF NOVEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALLIANT INSURANCE SERVICES HOUSTON, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



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061088391

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5231937

DATE: 11-29-06

ALLIANT INSURANCE SERVICES, INC.

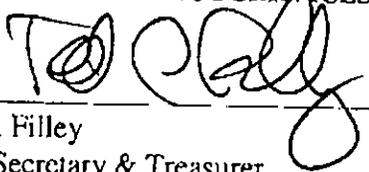
CONSENT TO USE OF NAME

ALLIANT INSURANCE SERVICES HOUSTON, LLC (the "Consent")

The undersigned entity hereby consents to **JARDINE LLOYD THOMPSON, LLC**, a Delaware LLC, using the corporate name **ALLIANT INSURANCE SERVICES HOUSTON, LLC**.

IN WITNESS WHEREOF, the undersigned has executed this Consent on this 11th day of December, 2006. The undersigned hereby directs that this Consent be submitted in support of the request to change the name of Jardine Lloyd Thompson, LLC to Alliant Insurance Services Houston, LLC. Alliant Insurance Services, Inc. holds 100% membership in Jardine Lloyd Thompson, LLC.

ALLIANT INSURANCE SERVICES, INC



Ted C. Filley
SVP, Secretary & Treasurer