Filing and License Fee: \$310.00 minimum '

ID Number: 14 034 8



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Matthew A. Brown
Corporations Division
100 North Main Steet
Providence, Rhode Island 02903-1335

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY (To Be Filed In Duplicate Original)

Pursuant to the provisions of Section 7-1.1-103 of the General Laws, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1.	The	name of the corp	poration is	Program 1	Management :	Servi	ces, Inc.	276					
2.	lt is i	ncorporated und	ler the laws	of Florid	ia								
3.	The	name, if differen	t, which it e	elects to use	n Rhode Island	d is:							
	(a)	If the name o "incorporated," above corporat	or "limited	l," or an abbi	eviation therec				ntain the word corporation with				
	(b)	If the corporate qualify and tra							ious name unde ess Name Stat				
4.	The	date of its incorp	oration is.	September	23, 1971		_ and the per	riod of its o	duration is Peri	petual			
5	The	address of its pri	incinal offic	re in the state	or country line	der the	laws of which	n it is incor	morated is				
٥.		•	•		•				· —	Lake M	lary, F	L 32746	
_		c/o Program Management Services, Inc., Suite 600, 615 Crescent Executive Ct., Lake Mary, FL											
о.	. The address of its proposed registered office in Rhode Island is												
	Providence , RI 02903 and the name of the proposed registered agent in Rhode Island a											e Island a	
		(City/T	own)	•	Zip Co			J p	. op ooot . og.o.o				
that address is Corporation Service Company													
			<u> </u>			(Name	e of Agent)						
7.	The	specific purpose	or purpos	es which it pr	oposes to purs	ue in t	he transaction	n of busine	ss in Rhode Isl	and are:			
	To engage in all lines of insurance-related business as an insurance agent/broker. To engage in												
	any act or activity for which corporations may be organized.												
8.	8. The names and respective addresses of the directors and officers are:										Har 2	 33	
				<u>Name</u>					<u>Address</u>				
	D	irector	See at	tached of	ficers/dir	recto	rs rider						
	D	irector									ر <i>۱</i> ۲	<u> </u>	
		resident							ILED		UT.		
		ice President			.			-	ODDI		<u>=:.</u>	<u>"°</u>	
		reasurer						AM	y 25 2004		<u> </u>	<u> </u>	
	S	ecretary			 				$- \sqrt{h}$		_ -		
	orm No evised:	o. 150 07/03						Ву	-111	5243	,4		

	Number of Shares	<u>Class</u>	<u>Series</u>	Par Value or Statement that Shares are without Par Value						
-	2,500	Common		\$1.00						
-	_,									
	The aggregate number of its issivithin a class, is:	ued shares, itemized by cla	asses, par value of shares,	shares without par value, and series, if an						
	Number of Shares	Class	<u>Series</u>	Par Value or Statement that Shares are without Par Value						
-	2,500	Common		\$1.00						
- 11. (of all property to be own	ed by the corporation for	the following year, wherever located, is						
	\$ 1,000,000.00	·								
(b) An estimate of the value of the	he corporation's property to	be located within Rhode Is	sland during the following year is						
	\$ 0.00	·								
(ng the following year bears	to the value of all property of	alue of the property of the corporation to bot the corporation to be owned during the ultiply by 100 to obtain the percentage.						
12. (a) An estimate of the gross = \$ 18,000,000	amount of business to be	e transacted by the corp	poration during the following year is						
(b) An estimate of the gross am Island during the following yo		sacted by the corporation at	or from places of business in Rhode						
,	(c) An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the									
(corporation at or from places	s of business in this state di	uring the following year bea	rs to the gross amount thereof which will ide (b) by (a) and multiply by 100 to obtain						
	This application is accompanied the secretary of state or other au			I amendments thereto, duly authenticated b						
Date:	May 21, 2004		Program Management So	ervices, Inc.						
Date.		-	Public 1	Corporation Making Application						
		•	ру							
			y Spull	AND Grammig						
				Assistant Secretary (check one)						
	TEOF Florida									
cou	NTY OF Hillsborough									
	In Tampa Florida	, on this21	day ofMay	, 2004 , before me personal						
appe		_ 		peing duly sworn, declared that he/she is the						
	President			she signed the foregoing document as such						
aumo	prized agent, and that the statem Jennifer	A Hayes D0053391 EXPIRES et 3, 2005	The Ch	Hays						
	MY COMMISSION	er 3, 2005 FAMILIESURANCE INC.	Notacy Dublic	A. Hayes ()						
	is will in the control of the contro									

PROGRAM MANAGMENT SERVICES, INC.

<u>Name</u> <u>Office</u>

Jim W. Henderson Chairman/Sole Director

220 S. Ridgewood Ave. Daytona Beach, FL 32114

K. Shane Caldwell President

615 Crescent Executive Ct., Ste. 600

Lake Mary, FL 32746

David A. Canfield Vice President

451 Diamond Drive Ephrata, WA 98823

Michael Scholl Vice President

615 Crescent Executive Ct., Stc. 600

Lake Mary, FL 32746

Laurel L. Grammig Vice President/Secretary

401 E. Jackson St., Ste. 1700

Tampa, FL 33602

Thomas M. Donegan, Jr. Vice President/Assistant Secretary

401 E. Jackson St., Stc. 1700

Tampa, FL 33602

Cory T. Walker Treasurer

220 S. Ridgewood Ave. Daytona Beach, FL 32114



Bepartment of State

I certify the attached is a true and correct copy of the Articles of Incorporation, as amended to date, of PROGRAM MANAGEMENT SERVICES, INC., a corporation organized under the laws of the State of Florida, as shown by the records of this office.

The document number of this corporation is 388806.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Twenty-first day of May, 2004

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Cenda E. Hood Blenda H. Hood Secretary of State