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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

ज् बाक्वा०४

74-2728930

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Travco Services, Inc.				
		on - must include suffix	()	
Dear Sir or Madam:				
The enclosed "Application by For "Certificate of Existence," and che transact business in Florida.				
Please return all correspondence of	oncerning this matter	r to the following:		
Becky Staton				
-	(Name of	f Person)		
Insurance Licensing Services of Ame	erica, Inc.			80 VISI
	(Firm/Co	empany)		08 FEB 27 AM 9: 09
111 N. Railroad Street	(Add			- 2 g
Groesbeck	`	1033)	76642	AH 9: 09
Gloesbeck	(City/State	and Zip code)	70042	جِ بِ
For further information concerning	g this matter, please of	call:		
(Name of Person)	(Area	Code & Daytime Telep	ohone Number)	-
STREET/COURIER AD New Filing Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301 Enclosed is a check for the follow	rcle	New Filing !	Corporations 27	
	5 Filing Fee &	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Certificate of Certified Co	of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Travco Services	s, Inc.			
	corporation; must include "INCO Corp," "Inc," "Co," or "Corp.")	RPORATED," "CO	OMPANY," "CORPORATION,"	
Af name unaveri	luble in Florido, enter alternate co	momta nama adont	ed for the purpose of transacting business in Flo	
2. TX	able in Piorida, enter alternate co		ed for the purpose of transacting dusiness in Fio	ilua)
(State or country under the law of which it is incorporated)		rporated) 3	(FEI number, if applicable)	
4. 11/16/1994		5. Perp	etual	
(Date	of incorporation)	(Du	ration: Year corp. will cease to exist or "perpetu	ıal")
6. upon qualificati				
			ida, if prior to registration) S., to determine penalty liability)	
7.2009 S 10th St	McAllen	TX	78503	
	(Princi	pal office address)		
2009 S 10th St	McAllen	TX	78503	
	(Currer	nt mailing address)		
8. Non-resident in	surance agency			- E
		me state or country	to be emilied out in blace of a fortune,	SECS SECS
9. Name and stree	et address of Florida registered	•	NOT acceptable)	RETAR
Name:	Corporation Service Company			- 요속
Office Address:	1201 Hays Street			OF STA
	Tallahassee		32301	ATIO
	(City)		(Zip code)	XS.

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company	Jacqueline N. Casper, Assistant VF
& sequelive M Carses	
(Registered agent's signature)	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

SECRETARY OF STATE DIVISION OF CORPORATIONS

A. DIRECTORS	•	Alalong of compression		
Chairman:			08 FEB 27 AM 9:	10
Address:				
Vice Chairman:				
Address:			1100-04-100	
Director:				
Address:				
Director:				
Address:				
B. OFFICERS				
President: Pablo Steinman				
Address: 2009 S 10th St	McAllen	TX	78503	
Vice President: Joicie M. Gatton				
	McAllen			
Secretary:				
Address:				
Treasurer:	-			
Address:				
NOTE: If necessary, you may att	ach an addendum to the ap	plication listing addi	tional officers and/or directors.	
13.	XH -			
(Signature	of Director or Officer lister	d in number 12 of the	application)	
14. Joicie M. Gatton / Vice Presiden				
(Typed or	printed name and capacit	y of person signing ap	plication)	

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



Office of the Secretary of State

Certificate of Fact

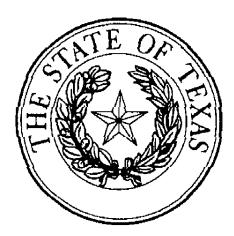
The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for TRAVCO SERVICES, INC. (file number 133319600), a Domestic For-Profit Corporation, was filed in this office on November 16, 1994.

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

SECRETARY OF STATE

SIVISION OF CORPORATIONS

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 January 16, 2008.



Phil Wilson Secretary of State

Welson