Scott J. Kipper, Commissioner of Insurance

Non-Res. Third Party Admin.

SCION DENTAL INC

10201 N PORT WASHINGTON RD
MEQUON , WI 53092

is authorized to transact business as described above

License No: 667216 Issue Date: 09-22-2009 Expiration Date: 10-01-2012

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Nevada Division of Insurance

THIS IS TO CERTIFY THAT

SCION DENTAL INC
10201 N PORT WASHINGTON RD , MEQUON , WI 53092

LICENSE NUMBER: 667216

IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN BELOW:

Non-Res. Third Party Admin.

Issue Date: 09-22-2009 Expiration Date: 10-01-2012

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