

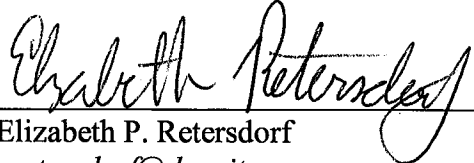
**STATE OF CONNECTICUT
INSURANCE DEPARTMENT**

| | | |
|------------------------------------|---|-----------------|
| In the Matter of: | : | DOCKET NO. |
| | : | |
| PROPOSED ACQUISITION OF CONTROL OF | : | |
| WELLCARE HEALTH INSURANCE OF | : | EX 19-48 |
| CONNECTICUT, INC. and WELLCARE OF | : | |
| CONNECTICUT, INC. | : | |
| | : | |
| by | : | |
| | : | |
| CENTENE CORPORATION | : | AUGUST 27, 2019 |

NOTICE OF APPEARANCE

Please enter my appearance in the above-designated matter on behalf of Centene Corporation.

I am authorized to accept service on behalf of said participant in this matter.

By 
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