

# State of Idaho

Office of the Secretary of State

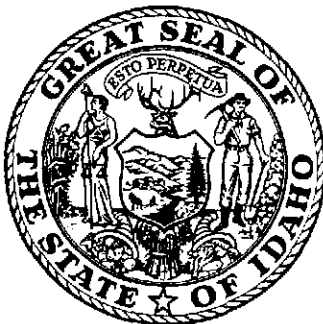
**CERTIFICATE OF AUTHORITY  
OF  
LEAVITT CENTRAL COAST INSURANCE SERVICES, INC.**

File Number C 204141

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: November 20, 2014



*Ben Ysursa*

SECRETARY OF STATE

By *[Signature]*



# APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2014 NOV 20 AM 9:54

SECRETARY OF STATE  
STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

- The name of the corporation is:  
Leavitt Central Coast Insurance Services, Inc.
- The name which it shall use in Idaho is: \_\_\_\_\_
- It is incorporated under the laws of: California
- Its date of incorporation is: 12/30/2008
- The address of its principal office is:  
950 E. Blanco Rd. Ste 103 Salinas CA 93901
- The address to which correspondence should be addressed, if different from item 5, is:  
\_\_\_\_\_
- The street address of its registered office in Idaho is: Corporation Service Company  
and its registered agent in Idaho at that address is: 12550 W. Explorer Drive Suite 100 Boise ID 83713 Ada County
- The names and respective business addresses of its directors and officers are:

Name	Title	Business Address
<u>See Attached</u>	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 11/12/14

Signature: [Signature]

Typed Name: Melissa Langley

Capacity: Vice President  
[The signer must be a director or an officer of the corporation.]

Customer Acct # : \_\_\_\_\_

(if using pre-paid account)

Secretary of State use only

IDAHO SECRETARY OF STATE

11/20/2014 05:00

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Revised 05/2005

Web form

C204141

**Leavitt Central Coast Insurance Services, Inc.**  
**950 East Blanco Road, Suite 103**  
**Salinas, CA 93901**

<b>TITLE</b>	<b>NAME</b>	<b>ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>President:</b>	Caylor J. Dalley	216 S 200 W	Cedar City	UT	84720
<b>Vice President:</b>	Ward McKalson	950 E. Blanco Rd. # 103	Salinas	CA	93901
<b>Vice President:</b>	Melissa Langley	950 E. Blanco Rd. # 103	Salinas	CA	93901
<b>Secretary:</b>	Mark G. Kenney	216 S 200 W	Cedar City	UT	84720
<b>Treasurer (CFO)</b>	Jake Jensen	216 S 200 W	Cedar City	UT	84720
<b>Directors:</b>	Vance K. Smith	216 S 200 W	Cedar City	UT	84720
	Eric O. Leavitt	216 S 200 W	Cedar City	UT	84720
	Caylor J. Dalley	216 S 200 W	Cedar City	UT	84720
	Ward McKalson	950 E Blanco Rd. #103	Salinas	CA	93901
	Melissa Langley	950 E Blanco Rd. #103	Salinas	CA	93901

**Owner:** Leavitt Group Enterprises 78.19%

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**ENTITY NAME:**

LEAVITT CENTRAL COAST INSURANCE SERVICES, INC.

FILE NUMBER: C3182919  
FORMATION DATE: 12/30/2008  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of November 12, 2014.

*Debra Bowen*

DEBRA BOWEN  
Secretary of State

MMS