

State of Idaho

Office of the Secretary of State

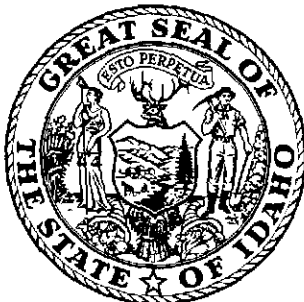
**CERTIFICATE OF REGISTRATION
OF
TVPX AVIATION INSURANCE, INC.**

File Number C 218064

I, LAWRENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, 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 Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: May 29, 2018



Lawrence Denney
SECRETARY OF STATE

By _____

[Signature]



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2018 MAY 29 AM 10:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the entity is: TVPX Aviation Insurance, Inc.

2. The name which it shall use in Idaho is: _____

(Enter a name here, only if you are required to adopt an alternate name)

3. Select the type of entity you wish to register:

☒ Business Corporation

☐ General Partnership

☐ Nonprofit Corporation

☐ General Cooperative Association

☐ Limited Liability Partnership

☐ Limited Partnership (Including a limited liability limited partnership)

☐ Limited Liability Company

☐ Statutory Trust, Business Trust, or Common-law Business Trust

☐ Other: _____

(Use "Other" only if your foreign entity type is not listed above, and enter the type here.)

4. Jurisdiction of formation: Massachusetts

(Provide the domestic jurisdiction where the entity was formed)

5. The address of its principal office is:

2352 Main St., Ste. 201, Concord, MA 01742

(Street Address)

(Mailing Address, if different)

6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

2352 Main St., Ste. 201, Concord, MA 01742

(Street Address)

(Mailing Address, if different)

7. The mailing address to which correspondence should be addressed, if different from item 5, is:

(Address)

8. Name and street address of registered agent in Idaho:

Idaho DOI Dir, Dean L. Cameron 700 W. State St., Fl 3, Boise, ID 83702

(Name)

(Address)

9. The name, capacity, and mailing address of at least one governor:

Tobias Kleitman

Pres.

2352 Main St., Ste. 201, Concord, MA 01742

(Name)

(Capacity)

(Address)

(Name)

(Capacity)

(Address)

Typed Name: Tobias Kleitman

Signature: _____

Capacity: President

Secretary of State use only

IDAHO SECRETARY OF STATE

05/29/2018 05:00

CK:7821 CT:317536 BH:1646101

1@ 100.00 = 100.00 FOR REG ST #2

C218064



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

Date: May 02, 2018

To Whom It May Concern :

I hereby certify that according to the records of this office,

TVPX AVIATION INSURANCE, INC.

is a domestic corporation organized on **September 13, 2017**, under the General Laws of the Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

Certificate Number: 18050062730

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

Processed by: