



**STATE OF IDAHO**  
*Office of the secretary of state, Lawrence Denney*  
**FOREIGN REGISTRATION STATEMENT (LIMITED LIABILITY COMPANY)**

Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301  
Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

For Office Use Only 0003430520

**-FILED-**

File #: 0003430520

Date Filed: 2/15/2019 7:12:40 AM

1. The name this limited liability company will use in Idaho is: Entity name			Benefit Advisors Services Group, LLC
2. Home Jurisdiction The jurisdiction of formation is:			GEORGIA
3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is: Street Address			1120 SANCTUARY PARKWAY SUITE 375 ALPHARETTA, GA 30009
4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is: Mailing Address			1120 SANCTUARY PARKWAY SUITE 375 ALPHARETTA, GA 30009
5. The complete street address of the principal office is: Principal Office Address			1120 SANCTUARY PARKWAY SUITE 375 ALPHARETTA, GA 30009
6. The mailing address of the principal office is: Mailing Address			1120 SANCTUARY PKWY STE 375 ALPHARETTA, GA 30009-7630
7. Registered Agent Name and Address Registered Agent			CORPORATION SERVICE COMPANY Commercial Registered Agent Physical Address 12550 W EXPLORER DR STE 100 BOISE, ID 83713 Mailing Address 12550 W EXPLORER DR STE 100 BOISE, ID 83713
8. Governors			
Name			Title
Alliant Insurance Services, Inc.			Member
			1301 DOVE ST STE 200 NEWPORT BEACH, CA 92660-2436
Signature of individual authorized by the entity to sign: Jennifer Baumann Sign Here Signer's Title: Manager			
			02/15/2019 Date



Print & Mail Enclosures

☒ I understand the document can ONLY be filed if the following items are included:

Certificate of Existence/Good Standing from the State in which this entity was originally formed dated within 90 days of today.

Payment in the amount of \$100.00 - checks payable to the Secretary of State, signed and recently dated.

This filing form (submit within 30 days) with the required signature(s).

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, **Robyn A. Crittenden**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### **BENEFIT ADVISORS SERVICES GROUP, LLC**

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 16312477  
Date Inc/Auth/Filed: 08/10/2011  
Jurisdiction : Georgia  
Print Date : 12/14/2018  
Form Number : 211



Robyn A. Crittenden  
Secretary of State