## State of Idaho

Office of the Secretary of State

### CERTIFICATE OF REGISTRATION OF

AEROSPACE INSURANCE MANAGERS, INC.

File Number C 209485

I, LAWERENCE 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: April 7, 2016

THE TOTAL

SECRETARY OF STATE

# 202

#### FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

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

Complete and submit the form in duplicate.

2016 APR -7 AM 9: 50

SECRETARY OF STATE STATE OF IDAHO

1.	1. The name of the entity is: AEROSPACE INSURANCE MANAGERS, INC.					
2.	The name which it shall use in Id	laho is:	_			
		(Enter a name here, only if you are required to adopt an alternate name)  Select the type of entity you wish to register:				
٥.	☑ 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 "Öther" only if your for		listed above, and e	nter the	e type here.)	
4.	Jurisdiction of formation: TEXA	S (Brounds th	a domactic juriedle	tion wi	here the entity was formed)	
5.	(Provide the domestic jurisdiction where the entity was formed)  The address of its principal office is:					
	13727 NOEL RD STE 1000, GALLERIA NORTH TOWER II, DALLAS, TX 75240-1356					
	(Street Address)					
		<u> </u>				
	(Mailing Address, if different)					
6.	The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:					
(Cheer) Indiana)						
(Street Address)						
	(Mailing Address, if different)	Mailing Address, if different)				
7.	The mailing address to which correspondence should be addressed, if different from item 5, is:					
	·	·				
	(Address)	<u> </u>				
В.	Name and street address of regis	stered agent <u>in Ida</u>	aho:			
	Dean L. Cameron, ID DOI Director 700 W. State St Floor 3, Boise, ID 83702					
	(Name)	(Addre				
9.	The name, capacity, and mailing	address of at leas	st one governor	:		
	James A. Damonte	President	13727 Noe	l Rd	Ste1000, Galleria N Twr II,Dallas TX 75240	
	(Name)	(Capacity)	(Address)			
	Irving Becker	SVP & CFO	13727 Noe	l Rd	Ste1000, Galleria N Twr II, Dallas TX 75240	
	(Name)	(Capacity)	(Address)	_		
				IDAHO SECRETARY OF STATE		
				Ē	04/07/2016 05:00	
Typed Name: Miles L. Seaborn				1 83	CK:89692 CT:234812 BH:1522508	
₩ 10 100.00 = 100.00 FOR REG S					10 100.00 = 100.00 FOR REG ST #2	
Signature: 11 July / feat 5 C209485						

Rev. 08/2015

Capacity: Vice President



#### Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for AEROSPACE INSURANCE MANAGERS, INC. (file number 146880700), a Domestic For-Profit Corporation, was filed in this office on December 02, 1997.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 29, 2016.



Carlos H. Cascos Secretary of State