# State of Idaho

## Office of the Secretary of State

#### **CERTIFICATE OF AUTHORITY**

OF

#### INDEPENDENT FUNERAL INSURANCE AGENCY, INC.

#### File Number C 194674

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: May 9, 2012



Ben youra

By Jinda Corbus



# **APPLICATION FOR CERTIFICATE** OF AUTHORITY (For Profit) (Instructions on Back of Application)

	(		7017 MAY -9 FILL2: 00	
The undersigned C	orporation applies for	r a Certificate of Authority and sta	tes as follows: SECRETARY DE STATE STATE OF TUAHO	
. The name of the	ne corporation is:			
Independe	nt Funeral Insurar	nce Agency, Inc.		
The name which	ch it shall use in Idaho	o is:	-	
It is incorporate	ed under the laws of:	California		
	date of incorporation is: August 25, 2010			
The address o	f its principal office is	:		
97 Vernon	Street, Roseville,	CA. 95678		
2930 N. Silv	verlæfWay, Merid	2930 N. Sil	verleaf Way, Meridian, Id. 83646	
The street address of its registered office in idano is:,				
and its register	ed agent in Idaho at t	that address is: Terry B. Edw	ards	
<b>-</b> 1		C' 1	r	
	j respective business	addresses of its directors and of		
Name		Title E	Business Address	
Craig Herber	дег	President 9	97 Vernon Street, Roseville, CA. 95678	
Terry B. Edw	rards	Secretary 2	2930 N. Silverleaf Way, Meridian, Id. 8364	
	<u> </u>			
	, , , , , , , , , , , , , , , , , , , ,	·		
Pated: April 2, 2012			former Acct # :	
	0 00 00		(if using pre-paid account)  Secretary of State use only	
ignature:	45 EDWARDS	lf. pmd	, <del></del>	
yped Name: Terry B. Edwards			IDANO SECRETARY OF STATE 05/09/2012 05:00	
apacity: Secre	tary	g.koop)formskoop pforcestolauthority_profit.pmd Revised06/2005	CK: 5106 CT: 278227 BH: 1323498 1 0 100.00 = 100.00 AUTH PRO # 2	
	r must be a director or a	n officer of the corporation.]		

Web Form

C 194674

### State of California

# Secretary of State

CERTIFICATE OF STATUS

#### ENTITY NAME:

INDEPENDENT FUNERAL INSURANCE AGENCY, INC.

FILE NUMBER:

C3315257

FORMATION DATE:

08/25/2010

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 April 27, 2012.

DEBRA BOWEN
Secretary of State