



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned
submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2006 AUG 24 AM 9:08

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Integrated Property & Casualty

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Harrison Insurance & Financials, Ltd.

P.O. box 276; Hailey, ID 83333

(C160101)

101 E. Bullion #2A

Hailey, ID 83333

3. The general type of business transacted under the assumed business name is:

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☒ Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Harrison Insurance & Financials, Ltd

P.O. Box 276

Hailey, ID 83333-0276

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-788-3255

Signature: Kathleen M. Harrison

(signature required)

Printed Name: Kathleen M. Harrison

Capacity/Title: President

(see instruction # 8 on back of form)

Secretary of State use only

D103026

IDAHO SECRETARY OF STATE
08/24/2006 05:00
CK: 3047 CT: 203719 BH: 971685
1 @ 25.00 = 25.00 ASSUM NAME # 3

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Revised 04/2003