

State of Idaho

Office of the Secretary of State

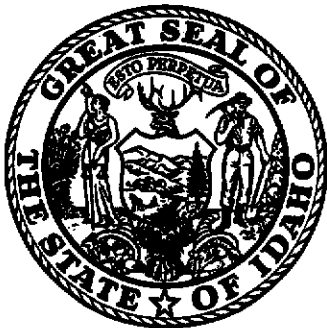
**CERTIFICATE OF AUTHORITY
OF
U-PIC INSURANCE SERVICES, INC.**

File Number C 187435

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: June 4, 2010



Ben Yursa

SECRETARY OF STATE

By

[Signature]



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

FILED EFFECTIVE

10 JUN -3 AM 8:23

SECRETARY OF STATE
STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

1. The name of the corporation is:

U-PIC INSURANCE SERVICES, INC.

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

3. It is incorporated under the laws of: California

4. Its date of incorporation is: 11/05/2001

5. The address of its principal office is:

5703 Corsa Avenue, 2nd Floor; Westlake Village, CA 91362

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

7. The street address of its registered office in Idaho is: 1423 Tyrell Lane, Boise, Idaho 83706

and its registered agent in Idaho at that address is: National Registered Agents, Inc.

8. The names and respective business addresses of its directors and officers are:

Name	Office	Address
<u>Bliss Wendelburg</u>	<u>President</u>	<u>5703 Corsa Avenue, 2nd Floor</u> <u>Westlake Village, CA 91362</u>
<u>Marv Landon</u>	<u>Secretary</u>	<u>5703 Corsa Avenue, 2nd Floor</u> <u>Westlake Village, CA 91362</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 5/26/10

Signature: [Signature]

Typed Name: Bliss Wendelburg

Capacity: President

[The signer must be a director or an officer of the corporation.]

Customer Acct #:

(if using pre-paid account)

Secretary of State use only

IDAHO SECRETARY OF STATE
06/03/2010 05:00
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Revised 06/2005

Web Form

C187435

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

U-PIC INSURANCE SERVICES, INC.

FILE NUMBER: C2364332
FORMATION DATE: 11/05/2001
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 May 25, 2010.

Debra Bowen

DEBRA BOWEN
Secretary of State