# State of Idaho

### **Department of State**

CERTIFICATE OF AUTHORITY OF

#### CLAIMS ADJUSTING AND PROCESSING SERVICE COMPANY

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of CLAIMS ADJUSTING AND PROCESSING SERVICE COMPANY for a Certificate of Authority to transact business in this State, duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to CLAIMS ADJUSTING AND PROCESSING SERVICE COMPANY to transact business in this State under the name CLAIMS ADJUSTING AND PROCESSING SERVICE COMPANY and attach hereto a duplicate original of the Application for such Certificate.

Dated: December 1, 1993

Tite of Cenarrusa SECRETARY OF STATE

## APPLICATION FOR CERTIFICATE OF AUTHORITY (Brofit Corporation) (Brofit Corporation)

(Profit Corporation)

SECRETARY OF STATE

Го	the Secretary of State of Idaho		
	Pursuant to Section 30-1-110, Idaho Code, the undersigned Corporation hereby applies for a Certificat Authority to transact business in your State, and for that purpose submits the following statement:		

. The name of the corporation is <u>CLAIMS ADJUSTING</u>	AND PROCESSING SERVICE COMPANY
. The name which it shall use in Idaho is	
(To be used only when required to avoid a conflict with a name all Directors resolution adopting assumed name in Idaho.)	ready on file. Must be accompanied by a Board of
. It is incorporated under the laws of <u>Delaware</u>	
. The date of its incorporation is November 9, 1993	and the period of its duration,
if other than perpetual, is	
. The address of its principal office in the state or country und	ler the laws of which it is incorporated is
32 Loockerman Square; Dover, Delaware	19901
. The address to which correspondence should be addressed	, if different than item 5, is
3225 Gallows Road, Fairfax, Virginia	22037
The street address of its proposed registered office in Idaho C/o The Prentice-Hall Corporation Sy 877 Main Street, Boise, Idaho 83702-	stem, Inc., 5858 , and the name of its proposed
registered agent in Idaho at that address isThe _Prent:	ice-Hall Corporation System, Inc.
. The purpose or purposes which it is proposed to pursue in t	he transaction of business in Idaho are:
handling of claims made by or against	companies incorporated and
qualified in the United States.	
(Continued on reverse)	IDAHO SECRETARY OF STR
Submit applications and certificate of status	Secretary of \$199318910n0900 37581 2 CK #: 20369 CUST# 22601 CDRP 10 120.00= 120
Office of the Secretary of State Division of Corporations	1000
	#: C
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Name	Office	Address
SEE ATTACHED LIST		
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	nd shall comply with the	e provisions of the Constitution and the laws of the State of
Idaho.		
Dated: 11/2.5 / 9.3		CLAIMS ADJUSTING AND PROCESSING
Dated: 11/2.5 / 9.3		SERVICE COMPANY
Dated: 11/23/93		SERVICE COMPANY (Corporation name)
Dated: 11/23/93	Ву	SERVICE COMPANY
Dated: 11/23/93	By	SERVICE COMPANY  (Corporation name)  (B) (DENT)  Its President/Vice President (please specify)  3. Q. Deven
	<del> </del>	SERVICE COMPANY (Corporation name)
STATE OFVIRGIN	A) ) ss:	SERVICE COMPANY  (Corporation name)  (B) (DENT)  Its President/Vice President (please specify)  3. Q. Deven
STATE OFVIRGIN	) ss: )	SERVICE COMPANY  (Corporation name)  (B) (DENT)  Its President/Vice President (please specify)  3. Q. Deven
STATE OFVIRGIN	A ) ) ss: )	SERVICE COMPANY  (Corporation name)  (B) (DENT)  Its President/Vice President (please specify)  3. Q. Deven
STATE OFVIRGINI COUNTY OFFAIRFAX I,LEILA E.	) ) ss: ) kamp	(Corperation name)  (Corperation name)  (B) (DENT  (Its President/Vice President (please specify)  (Its Secretary/Assistant Secretary (please specify)  , a notary public, do hereby certify that on
STATE OFVIRGINICOUNTY OFFAIRFAX_ I,LEILA E. thisday	A ) ) ss:  KAMP  ofNovember	(Corperation name)  (Corperation name)  (RESTRICT  Its President (please specify)  Its Secretary/Assistant Secretary (please specify)  , a notary public, do hereby certify that on  19 93 , personally appeared before
ETATE OFVIRGINICOUNTY OFFAIRFAX  I,LEILA E.  this23rdday  me _M. K. Molloy	A ) ) ss:  KAMP  ofNovember	(Corperation name)  (Register T  Its Pasient Vice President (please specify)  Its Secretary/Accietant Secretary (please specify) , a notary public, do hereby certify that on, 19 93, personally appeared before, who being by me first duly sworn, declared that (s)he
STATE OFVIRGINICOUNTY OFFAIRFAX  I,LEILA E.  this23rdday  me _M. K. Molloy	A ) ) ss:  KAMP  ofNovember	(Corperation name)  (Corperation name)  (B) (DENT  Its President (please specify)  Its Secretary/Assistant Secretary (please specify)  , a notary public, do hereby certify that on  , 19 93 , personally appeared before
STATE OFVIRGINICOUNTY OFFAIRFAX	A ) ) ss:	(Corporation name)  (B) (DENT  Its Pes NentAlice President (please specify)  Its Secretary/Assistant Secretary (please specify)  , a notary public, do hereby certify that on  , 19 93  , personally appeared before  , who being by me first duly sworn, declared that (s)he  MS ADJUSTING AND PROCESSING SERVICE COMPANY
I, LEILAE.  this day  me _M. K. Molloy  s the President	A ) ) ss: )   KAMP   OfNovember   OfCLAIR   OfCL	(Corperation name)  (Resident (Please specify)  Its Pesigent (Please specify)  Its Secretary/Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19 93, personally appeared before, who being by me first duly sworn, declared that (s)he MS ADJUSTING AND PROCESSING SERVICE COMPANY
STATE OFVIRGINICOUNTY OFFAIRFAX  I,LEILA E.  This23rdday  ThePresident  That (s)he signed the foregoing	A ) ) ss: )   KAMP   OfNovember   OfCLAIR   OfCL	(Corporation name)  (B) (DENT  Its President Vice President (please specify)  Its Secretary/Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19 93, personally appeared before, who being by me first duly sworn, declared that (s)he MS ADJUSTING AND PROCESSING SERVICE COMPANY
STATE OFVIRGINICOUNTY OFFAIRFAX  I,LEILA E.  This23rdday  ThePresident  Shat (s)he signed the foregoing	A ) ) ss: )   KAMP   OfNovember   OfCLAIR   OfCL	(Corperation name)  (B) (DENT)  Its President/Vice President (please specify)  Its Secretary/Assistant Secretary (please specify) , a notary public, do hereby certify that on, 19 93, personally appeared before, who being by me first duly sworn, declared that (s)he MS ADJUSTING AND PROCESSING SERVICE COMPANY

#### CLAIMS ADJUSTING AND PROCESSING SERVICE COMPANY

#### DIRECTORS denoted by\*\*

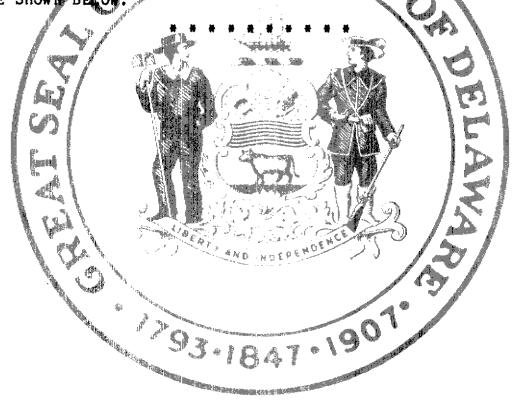
NAME	OFFICE	ADDRESS
R. J. Beno**		1201 Elm Street Dallas, TX 75270
D. M. Coughlin** R. D. Jiaconia** M. K. Molloy** F. A. Rowen, Jr.** K. M. Mandel	Vice President President Vice President Controller/ Treasurer	3225 Gallows Road Fairfax, VA 22037
P. A. Stevenson	Secretary	
R. L. Book	Asst. Secretary	l201 Elm Street Dallas, TX 75270
G. G. Garney	Asst. Secretary	
C. T. Olson	Asst. Secretary	Fairfax, VA 22037 1201 Elm Street Dallas, TX 75270

#### State of Delaware

#### Office of the Secretary of State

SECRETARY OF STATE

I, WILLIAM T. QUILLEN, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY CLAIMS ADJUSTING AND PROCESSING SERVICE COMPANY IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO AR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE DATE SHOWN BELOT.





William J. Zuillen

William T. Quillen, Secretary of State

AUTHENTICATION: #4165347

DATE:

11/29/1993