State of Idaho

Office of the Secretary of State

OF PAUL DAVIS NATIONAL, LLC

File Number W 204774

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: July 10, 2018



SECRETARY OF STATE

By Juli Hakein

202

FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

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

Complete and submit the form in <u>duplicate</u>.

2018 JUL 10 PH 12: 52

SECRETARY OF STATE

| . The name of the entity is: Paul Davis National, LLC | | STATE OF IDAHO |
|--|--|---|
| | | |
| . The name which it shall use in Ida | (Enter a name hen | e, only if you are required to adopt an alternate name) |
| Select the type of entity you wish t | | |
| ☐ Business Corporation | ☐ General Partnership | |
| ☐ Nonprofit Corporation | · | |
| ☐ Limited Liability Partnership | - | - · · · · · · · · · · · · · · · · · · · |
| ☑ Limited Liability Company | ☐ Statutory Trust, Busine | ss Trust, or Common-law Business Trust |
| Other: (Use "Other" only if your foreign | The state of the s | star the sine logo |
| Use Other any it you live. Jurisdiction of formation: Wiscor | gn engly type is <u>ngi</u> asted above, and er i sin | nei em Abe neies |
| Jurisdiction of formation: | (Provide the domestic jurisdict | tion where the entity was formed) |
| The address of its principal office. | | |
| 2010 South Fourth Street, M | lilwaukee, WI 53204 | |
| (Street Address) | _ | |
| (Mailing Address, if different) | | |
| | and office (if any sired by the lower | a of the jurisdiction of formation) is: |
| i. The address of its domestic princi | par office (if required by the laws | s of the jurisdiction of formation) is: |
| (Street Address) | | |
| (Mailing Address, if different) | | |
| | annual | and if different from item 5 is: |
| The mailing address to which corr Ferrante & Associates, 126 | Prospect St. Cambridge N | #A 02139 |
| (Address) | 1 105peat at, Gamenage, is | 11 () 100 |
| • | | |
| 3. Name and street address of regis | | 7 D. C. O. H. 400 Delea 3D 00740 |
| Corporation Service Compa | | lorer Drive, Suite 100, Boise, ID 83713 |
| (Name) | (Address) | |
| 9. The name, capacity, and mailing a | address of at least one governor | • |
| | | ,) |
| (Name) | (Capacity) (Address) | |
| Kevin Roy Manager / | Secretary 1140 Bay 9 | Street, Ste 4000, Toronto, ON M5S 2B4 |
| (Name) | (Capacity) (Address) | |
| , | | |
| | | Thire anapheray on anima |
| | | IDAHO SECRETARY OF STATE |
| - Kavin Pov | | 07/10/2018 05:00 |
| Typed Name: Kevin Roy | | S CK:18831 CT:240240 BH:1652862 10 100.00 = 100.00 FOR REG ST #2 |
| ~ /s | | 16 20.00 = 20.00 EXPEDITE C #3 |
| Signature: | | 5 20 20 20 20 EVERTITE O HO |
| Socratary /Managa | 7 ** | 07/10/2018 05:00 CK:18831 CT:240240 BH:1652862 16 100.00 = 100.00 FOR REG ST #2 16 20.00 = 20.00 EXPEDITE C #3 A) 0 5/477/4 |
| Capacity: Secretary / Manage | L | 18 W 204774 |
| | | N W I I I |

Rev. 08/2015

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS



Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, Mary Ann McCoshen, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

PAUL DAVIS NATIONAL, LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is July 14, 2011.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on July 02, 2018.

MARY ANN MCCOSHEN, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

224106-3098438C