## State of Idaho

Office of the Secretary of State

## **AMENDED CERTIFICATE OF REGISTRATION**

OF

## **NEWMARKETS INSURANCE AGENCY, INC.**

File Number C 137025

I, LAWERENCE DENNEY, Secretary of the State, hereby certify that an Application for Amended Foreign Registration 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 Amended Certificate of Foreign Registration to reflect the name change from NEWMARKETS INSURANCE AGENCY, INC. to **CHUBB INSURANCE SOLUTIONS AGENCY INC.** and attach hereto a duplicate of the application for such amended certificate.

Dated: April 13, 2017



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## AMENDMENT OF FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code Filing fee: \$30 typed, \$50 not typed

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



1. Entity name: NewMarkets Insurance Agency, Inc.  2. The entity name is amended to: Chubb Insurance Solutions Agency Inc.  a. If the new name is not available or permissible in Idaho, the name to be used in Idaho is:  3. The entity type is amended to:    Business Corporation					- " " - OI TUANO	
a. If the new name is not available or permissible in Idaho, the name to be used in Idaho is:	Entity name: NewMarkets Insurance	e Agency, Inc.				
a. If the new name is not available or permissible in Idaho, the name to be used in Idaho is:	C	hubb Insurance Sc	alutions Agency	Inc		
3. The entity type is amended to:    Business Corporation	2. The entity name is amended to:	made insurance be	Jiddolis Aigeney			
Business Corporation   General Partnership   General Cooperative Association   Imited Liability Partnership   Limited Partnership   Statutory Trust, Business Trust, or Common-law Business Trust     Other:	a. If the new name is not available	le or permissible	in Idaho, the r	ame to	be used in Idaho is:	
Business Corporation   General Partnership   General Cooperative Association   Imited Liability Partnership   Limited Partnership   Statutory Trust, Business Trust, or Common-law Business Trust     Other:	3. The entity type is amended to:					
Nonprofit Corporation   General Cooperative Association   Limited Liability Partnership   Limited Partnership   Limited Partnership   Indiced Partnership   Statutory Trust, Business Trust, or Common-law Business Trust		☐ General	Partnership			
Limited Liability Company	· · · · · · · · · · · · · · · · · · ·					
(Provide unlisted foreign entity type here)  4. The entity's jurisdiction is amended to:  5. The street and mailing address(es) of its principal office is amended to:  (Street Address)  (Mailing Address, if different)  6. The name, capacity, and mailing address of the governor(s) is amended to:  (Name)  (Capacity)  (Address)  Typed Name: Paul N. Morrissette  Signature:  1 DAHO SECRETARY OF STATE 04/13/2017 85:00 CK:11876 CT:188939 BH:1578939 16 30.00 = 30.00 AMD FOR RE #2	· · · · · · · · · · · · · · · · · · ·			_		
(Provide unitated foreign entity type here)  4. The entity's jurisdiction is amended to:  (Street Address)  (Mailing Address, if different)  5. The name, capacity, and mailing address of the governor(s) is amended to:  (Name)  (Capacity)  (Address)  (Name)  (Capacity)  (Address)  Typed Name: Paul N. Morrissette  (Capacity)  (Address)  (Capacity)  (Address)  (Capacity)  (Address)  (Capacity)  (Address)  (Capacity)  (Address)  (CK:11376 CT:183999 BH:1578939 16:30.00 = 30.00 AMD FOR RE #2	☐ Limited Liability Company	☐ Statutory	/ Trust, Busine	ss Trus	t, or Common-law Business Trust	
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(Mailing Address. if different)  5. The name, capacity, and mailing address of the governor(s) is amended to:  (Name) (Capacity) (Address)  (Name) (Capacity) (Address)  Typed Name: Paul N. Morrissette  Signature: Daho secretary of state 04/13/2017 05:00 CK:11276 CT:188999 BH:1578939 16:30.00 = 30.00 AMD FOR RE #2	4. The entity's jurisdiction is amende	d to:				
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Signature: CK:11876 CT:188999 BH:1578939 16 30.00 = 30.00 AMD FOR RE #2		de		nse (	•	
15	Signature:			of State	CK:11876 CT:188999 BH:1578939	
Capacity: President	Capacity: President			stany		

Rev. 06/2016

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CHUBB INSURANCE SOLUTIONS AGENCY INC."

IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF APRIL, A.D.

2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

at corn delaware gov/aut

Authentication: 202341231

Date: 04-07-17