

# State of Idaho

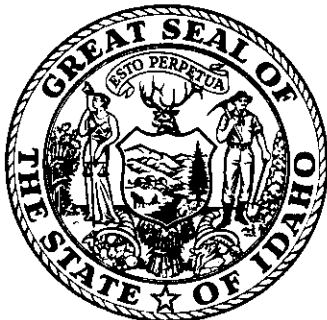
Office of the Secretary of State

**AMENDED CERTIFICATE OF AUTHORITY  
OF  
DRIVER ALLIANT INSURANCE SERVICES, INC.  
File Number C 148401**

I, BEN YSURSA, Secretary of the State, hereby certify that an Application for Amended Certificate of Authority, 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 Authority to reflect the name change from DRIVER ALLIANT INSURANCE SERVICES, INC. to **ALLIANT INSURANCE SERVICES, INC.** and attach hereto a duplicate of the application for such amended certificate.

Dated: May 10, 2006



*Ben Yursa*  
SECRETARY OF STATE

By *Sheryl Deidra*



# APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

(Instructions on back of application)

06 MAY 10 PM 1:31  
SECRETARY OF STATE  
STATE OF IDAHO

To the Secretary of State of the State of Idaho:

Pursuant to Section 30-1-1504, Idaho Code, the undersigned Corporation hereby applies for an amended certificate of authority to transact business in the State of Idaho and for that purpose submits the following statement. Complete only applicable items.

1. A Certificate of Authority was issued to the corporation by your office on: MARCH 27, 2003  
authorizing it to transact business in the State of Idaho under the name of:  
DRIVER ALLIANT INSURANCE SERVICES, INC.
2. Its corporate name has been changed to: ALLIANT INSURANCE SERVICES, INC.
3. The name which it shall use hereafter in the State of Idaho is:  
ALLIANT INSURANCE SERVICES, INC.
4. It has changed its jurisdiction of incorporation, without a change of corporate identity to: NO CHANGE

Dated: April, 2006 Corporation Name: ALLIANT INSURANCE SERVICES, INC.

Signature:

Typed Name: P. GREGORY ZIMMER, JR.

Capacity: President

Customer Acct # :

(if using pre-paid account)

Secretary of State use only

Discontinued application  
amended certificate of authority 06S  
Revised 07/2002

Web Form

IDAHO SECRETARY OF STATE   
05/10/2006 05:00  
CK: 37501 CT: 1154 BH: 954831  
1 @ 30.00 = 30.00 AMEND CERT # 4

C148401

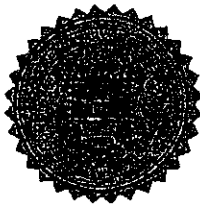
# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "DRIVER ALLIANT INSURANCE SERVICES, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ALLIANT INSURANCE SERVICES, INC.", THE NINTH DAY OF MAY, A.D. 2006, AT 10:05 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



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*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4732186

DATE: 05-09-06