





#### STATE OF IDAHO

Office of the secretary of state, Phil McGrane

## FOREIGN REGISTRATION STATEMENT (LIMITED LIABILITY COMPANY)

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0006417842

Date Filed: 9/15/2025 9:10:51 AM

Foreign Registration Statement (Limited Liability Company)	
Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filing fee \$100)
The name this limited liability company will use in Idaho is:  Type of Limited Liability Company	Foreign Limited Liability Company
Entity name SEVEN HILLS INSURANCE AGENCY LLC	SEVEN HILLS INSURANCE AGENCY LLC
Home Jurisdiction     The jurisdiction of formation is:	GEORGIA
The street address of its domestic principal office (if required by the laws of the Street Address	ne jurisdiction of formation) is: 2400 HERODIAN WAY SE STE 220 C-O SEVEN HILLS INSURANCE AGENCY, LLC SMYRNA, GA 30080
The mailing address of its domestic principal office (if required by the laws of Mailing Address	the jurisdiction of formation) is:  C-O SEVEN HILLS INSURANCE AGENCY, LLC 2400 HERODIAN WAY SE STE 220 SMYRNA, GA 30080-8500
5. The complete street address of the principal office is: Principal Office Address	SEVEN HILLS INSURANCE AGENCY, LLC 2400 HERODIAN WAY SE STE 220 C-O SEVEN HILLS INSURANCE AGENCY, LLC SMYRNA, GA 30080
6. The mailing address of the principal office is:  Mailing Address	SEVEN HILLS INSURANCE AGENCY LLC 2400 HERODIAN WAY SE STE 220 SMYRNA, GA 30080-8500
7. Registered Agent Name and Address Registered Agent	DEAN L CAMERON Commercial Registered Agent Physical Address 700 W STATE ST 3RD FL IDAHO DEPARTMENT OF INSURANCE BOISE, ID 83702 Mailing Address 700 W STATE ST 3RD FL BOISE, ID 83702

☑ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

Title

8. Governors

Name

Address



KALVIN D BREWER	Managing Member	SEVEN HILLS INSURANCE AGENCY LLC 2400 HERODIAN WAY SE STE 220 SMYRNA, GA 30080-8500
Signature of individual authorized by the entity to sign:		
Kalvin Brewer		09/15/2025
Sign Here		Date
Job Title: President		

Control Number: 23072932

### STATE OF GEORGIA

## **Secretary of State**

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### **CERTIFICATE OF EXISTENCE**

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

# Seven Hills Insurance Agency LLC a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 29804294
Date Inc/Auth/Filed: 03/24/2023
Jurisdiction : Georgia
Print Date : 07/23/2025
Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State