

State of Idaho

Office of the Secretary of State

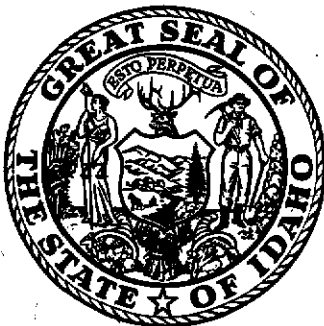
**CERTIFICATE OF AUTHORITY
OF
C3 INSURANCE AGENCY, INC.**

File Number C 193066

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Uniform Limited Liability Act, 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 Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: December 13, 2011



Ben Yursa

SECRETARY OF STATE

By

[Signature]



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

The undersigned Corporation applies for a Certificate of Authority and states as follows:

1. The name of the corporation is: C3 INSURANCE AGENCY, INC.
2. The name which it shall use in Idaho is: C3 Insurance Agency, Inc.
3. It is incorporated under the laws of: Florida
4. Its date of incorporation is: 07/29/2011
5. The address of its principal office is:
1200 South Pine Island Road, Ste. 200, Plantation, FL 33324
6. The address to which correspondence should be addressed, if different from item 5, is:

7. The street address of its registered office in Idaho is: 1423 Tyrell Lane, Boise, ID 83706
and its registered agent in Idaho at that address is: National Registered Agents, Inc.
8. The names and respective business addresses of its directors and officers are:

Name	Office	Address
<u>David L. Epstein</u>	<u>Director</u>	<u>1200 South Pine Island Rd., Ste. 200</u> <u>Plantation, FL 33324</u>
<u>Richard D. Mondre</u>	<u>Director</u>	<u>1200 South Pine Island Rd., Ste. 200</u> <u>Plantation, FL 33324</u>
<u>Mark J. Gordon</u>	<u>Director</u>	<u>1200 South Pine Island Rd., Ste. 200</u> <u>Plantation, FL 33324</u>
<u>Richard N. Ferry</u>	<u>President</u>	<u>1200 South Pine Island Rd., Ste. 200</u> <u>Plantation, FL 33324</u>
_____	_____	_____
_____	_____	_____

Dated: 11/23 2011

Signature: _____

Typed Name: Richard N. Ferry

Capacity: President

(The signer must be a director or an officer of the corporation.)

Customer Acct # :

(If using pre-paid account)

Secretary of State use only

Electronic
transmission
required

Web Form

IDAHO SECRETARY OF STATE
12/13/2011 05:00
CK: 7131 CT: 221028 BH: 1301523
1 @ 100.00 = 100.00 AUTH PRO # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

C193066

2011 DEC 13 PM 4:16
SECRETARY OF STATE
IDAHO

State of Florida

Department of State

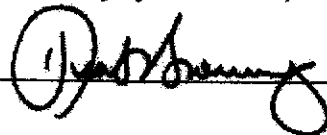
I certify from the records of this office that C3 INSURANCE AGENCY, INC. is a corporation organized under the laws of the State of Florida, filed on July 29, 2011.

The document number of this corporation is P11000068651.

I further certify that said corporation has paid all fees due this office through December 31, 2011, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the Great Seal of
Florida, at Tallahassee, the Capital, this the
Twenty Third day of November, 2011*



Secretary of State



Authentication ID: 900214583459-112311-P11000068651

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

<https://efile.sunbiz.org/certauthver.html>