

# State of Idaho

Office of the Secretary of State

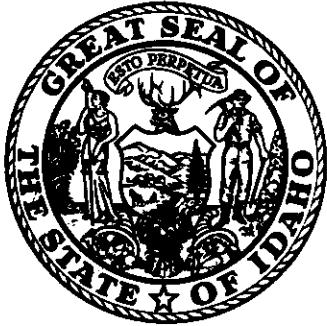
**CERTIFICATE OF AUTHORITY  
OF  
AMERIFAMILY INSURANCE LLC**

File Number W 130849

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: November 4, 2013



*Ben Ysursa*

SECRETARY OF STATE

By

*Ben Ysursa*



# APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 NOV -4 AM 10:10

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Amerifamily Insurance LLC

2. If the name of the limited liability company is not permissible or is not available in Idaho, the name the foreign limited liability company will use in Idaho is:

\_\_\_\_\_

3. The jurisdiction under whose laws the limited liability company is formed is: Utah

4. The name and complete street address of the registered agent in Idaho is:

Kristi Anderson 3596 W Fieno Ct. Eagle, Idaho 83616

5. The street and mailing address of the limited liability company's principal office is:

730 South Sleepy Ridge Drive Suite 01 Vineyard, UT 84058

Street Address

Mailing Address, if different

6. The street and mailing address of the limited liability company's office in the jurisdiction under whose laws it is organized is:

730 S Sleepy Ridge Drive Ste 01 Vineyard, UT 84058

Street Address

Mailing Address, if different

7. The name and mailing address of at least one member or manager:

John Tadje 730 S Sleepy Ridge Drive Ste 01 Vineyard, UT 84058

8. The mailing address for future correspondence:

730 S Sleepy Ridge Drive Ste 01 Vineyard, UT 84058

9. Signature of a manager, member or authorized person.

John Tadje

Signature

John Tadje

Typed Name

Secretary of State use only

IDAHO SECRETARY OF STATE  
11/04/2013 05:00  
CK: 5851 CT: 209284 BH: 1396531  
1 @ 100.00 = 100.00 REGFORBLLC # 3



**Utah Department of Commerce**  
**Division of Corporations & Commercial Code**  
160 East 300 South, 2nd Floor, PO Box 146705  
Salt Lake City, UT 84114-6705  
Service Center: (801) 530-4849  
Toll Free: (877) 526-3994 Utah Residents  
Fax: (801) 530-6438  
Web Site: <http://www.commerce.utah.gov>

11/01/2013  
8622922-016011012013-2732972

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## CERTIFICATE OF EXISTENCE

**Registration Number:** 8622922-0160  
**Business Name:** AMERIFAMILY INSURANCE LLC  
**Registered Date:** March 27, 2013  
**Entity Type:** LLC - Domestic  
**Current Status:** Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



*Kathy Berg*

Kathy Berg  
Director  
Division of Corporations and Commercial Code