







STATE OF IDAHO

Office of the secretary of state, Phil McGrane

FOREIGN REGISTRATION STATEMENT (BUSINESS CORPORATION)

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

For Office Use Only

-FILED-

File #: 0006156953

Date Filed: 3/25/2025 12:12:59 PM

Filing Fee

Selected Service Type: Standard (filing fee \$100)

1. The name this business corporation will use in Idaho is:

Type of Corporation

David Steinman Insurance Agency Inc.

The name of the business corporation in its home jurisdiction as shown on the attached certificate of existence/good standing: David Steinman Insurance Agency Inc.

Upload or Mail a one page PDF of a Certificate of

Existence/Good Standing from the home jurisdiction dated

within 90 days of today.

2. Home Jurisdiction

Entity name

The jurisdiction of formation is:

WASHINGTON

3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Street Address

DAVID STEINMAN 500 W. WISHKAH ST ABERDEEN, WA 98520

Foreign Business Corporation

4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Mailing Address

DAVID STEINMAN 500 W. WISHKAH ST ABERDEEN, WA 98520

5. The complete street address of the principal office is:

Principal Office Address

DAVID STEINMAN 500 W. WISHKAH ST ABERDEEN, WA 98520

6. The mailing address of the principal office is:

Mailing Address

DAVID STEINMAN 500 W WISHKAH ST

ABERDEEN, WA 98520-6030

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.

8. Governors

Name	Title	Address
David Steinman	Governor	1905 COUNCIL CREST DR ABERDEEN, WA 98520



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Signature of individual authorized by the entity to sign:					
David Steinman	03/25/2025				
Sign Here	Date				
Job Title: President					

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Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

DAVID STEINMAN INSURANCE AGENCY INC.

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 12/31/2012.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 03/25/2025 UBI Number: 603 263 290

R Hobbe



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Steve R. Hobbs, Secretary of State

Date Issued: 03/25/2025