



0006162513

**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 #: 0006162513

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Filing Fee

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

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

Type of Corporation

Foreign Business Corporation

Entity name

Pro Insurance Agency, Inc.

The name of the business corporation in its home jurisdiction as shown on the attached certificate of existence/good standing:
Pro 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

The jurisdiction of formation is:

NEW YORK

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

Street Address

21 BENNETTS ROAD
SUITE 202
EAST SETAUKET, NY 11733

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

Mailing Address

21 BENNETTS ROAD
SUITE 202
EAST SETAUKET, NY 11733

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

Principal Office Address

21 BENNETTS ROAD
SUITE 202
EAST SETAUKET, NY 11733

6. The mailing address of the principal office is:

Mailing Address

21 BENNETTS RD
STE 202
EAST SETAUKET, NY 11733-1243

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
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Michael ruffner	vp	21 BENNETTS ROAD SUITE 202 EAST SETAUKET, NY 11733
Signature of individual authorized by the entity to sign:		
<u><i>peter rosenberg</i></u> Sign Here		<u>03/31/2025</u> Date
Job Title: president		

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:	PRO INSURANCE AGENCY, INC.
DOS ID Number:	2471320
Entity Type:	DOMESTIC BUSINESS CORPORATION
Entity Status:	EXISTING
Date of Initial Filing with DOS:	02/08/2000
Statement Status:	CURRENT
Statement Due Date:	02/28/2026

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type:	CERTIFICATE OF INCORPORATION
Date of Filing:	02/08/2000
Entity Name:	PRO INSURANCE AGENCY, INC.

Document Type:	BIENNIAL STATEMENT
Date of Filing:	02/11/2002
Effective Date:	02/01/2002

Document Type:	BIENNIAL STATEMENT
Date of Filing:	03/31/2025

Above space is left blank intentionally.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

WITNESS my hand and official seal of the Department
of State, at the City of Albany, on March 31, 2025 at
03:02 P.M.

WALTER T. MOSLEY
Secretary of State



Brandon C. Hughes

BRENDAN C. HUGHES
Executive Deputy Secretary of State

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