



0005616740

**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 #: 0005616740

Date Filed: 2/29/2024 8:13:15 AM

## Foreign Registration Statement (Limited Liability Company)

Select one: Standard, Expedited or Same Day Service (see descriptions below)      Standard (filing fee \$100)

## 1. The name this limited liability company will use in Idaho is:

Type of Limited Liability Company

Foreign Limited Liability Company

Entity name

Anville Risk &amp; Insurance Services, LLC

Anville Risk &amp; Insurance Services, LLC

## 2. Home Jurisdiction

The jurisdiction of formation is:

MICHIGAN

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

Street Address

100 OTTAWA AVENUE, SW  
GRAND RAPIDS, MI 49503

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

Mailing Address

100 OTTAWA AVENUE, SW  
GRAND RAPIDS, MI 49503

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

Principal Office Address

100 OTTAWA AVENUE, SW  
GRAND RAPIDS, MI 49503

## 6. The mailing address of the principal office is:

Mailing Address

100 OTTAWA AVE SW  
GRAND RAPIDS, MI 49503-5087

## 7. Registered Agent Name and Address

Registered Agent

CORPORATION SERVICE COMPANY  
Commercial Registered Agent

Physical Address

1305 12TH AVE RD  
NAMPA, ID 83686

Mailing Address

1305 12TH AVE RD  
NAMPA, ID 83686☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

## 8. Governors

| Name             | Title   | Address  |
|------------------|---------|--|
| Acrisure, LLC    | Manager | 100 OTTAWA AVE SW<br>GRAND RAPIDS, MI 49503-5087 |
| Courtney Kolenda | Manager | 100 OTTAWA AVE SW<br>GRAND RAPIDS, MI 49503-5087 |

Signature of individual authorized by the entity to sign:



*Courtney Kolenda*

*02/29/2024*

Sign Here

Date

Job Title: Manager



**Department of Licensing and Regulatory Affairs**  
Lansing, Michigan

*This is to Certify That*

**ANVILLE RISK & INSURANCE SERVICES, LLC**

*was validly authorized on February 15, 2023, as a Michigan  
DOMESTIC LIMITED LIABILITY COMPANY  
and said limited liability company is validly in existence under the laws of this state and has satisfied its  
annual filing obligations.*

*This certificate is issued pursuant to the provisions of 1993 PA 23 to attest to the fact that the company is  
in good standing in Michigan as of this date.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit  
given it in every court and office within the United States.*



*Sent by electronic transmission*

Certificate Number: 24020515005

*In testimony whereof, I have hereunto set my hand,  
in the City of Lansing, this 22nd day of February, 2024.*

*Linda Clegg*

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau

Verify this certificate at: URL to eCertificate Verification Search <http://www.michigan.gov/corpverifycertificate>.