## State of Idaho

### Office of the Secretary of State

### CERTIFICATE OF REGISTRATION

OF

**USIC LOCATING SERVICES, LLC** 

File Number W 168852

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, 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 Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: July 6, 2016

THE OF O

SECRETARY OF STATE

# 202

#### FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in <u>duplicate</u>.

2016 JUL -6 PM 2: 07

SECHETARY OF STATE STATE OF IDAHO

| 1. | The name of the entity is: USIC Locating Services, LLC  |
|----|---|
| 2. | The name which it shall use in Idaho is:  |
| 3. | Select the type of entity you wish to register:  (Enter a name here, only if you are required to adopt an alternate name) |
|    | ☐ Business Corporation ☐ General Partnership  |
|    | ☐ Nonprofit Corporation ☐ General Cooperative Association   |
|    | ☐ Limited Liability Partnership ☐ Limited Partnership (Including a limited liability limited partnership                  |
|    | ☑ Limited Liability Company ☐ Statutory Trust, Business Trust, or Common-law Business Trust                               |
|    | Eleminod Elasimy Company  |
|    | Other: (Use "Other" only if your foreign entity type is not listed above, and enter the type here.)                       |
| 1  | Jurisdiction of formation: Indiana  |
| 4. | (Provide the domestic jurisdiction where the entity was formed)   |
| 5. | The address of its principal office is:   |
|    | 9045 N River Rd Ste 300   |
|    | (Street Address)  |
|    | Indianapolis, IN 46240  |
|    | (Mailing Address, if different)   |
| 6. | The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:               |
|    | 9045 N River Rd Ste 300   |
|    | (Street Address)  |
|    | Indianapolis, IN 46240  |
|    | (Mailing Address, if different)   |
| 7. | The mailing address to which correspondence should be addressed, if different from item 5, is:                            |
|    | (Address)   |
| 8. | Name and street address of registered agent in Idaho:   |
|    | CT Corporation System 12 somewhered or one of Solve 10 83705  |
|    | (Name) (Address)  |
| _  |   |
| 9. | The name, capacity, and mailing address of at least one governor:   |
|    | USIC, LLC Member 9045 N River Rd, Ste 300, Indianapolis, IN 46240   |
|    | (Name) (Capacity) (Address)   |
|    |   |
|    | (Name) (Capacity) (Address)   |
|    |   |
|    |   |
|    | idaho secretary of state  |
|    | lim Muhl 9 07/06/2016 05:00   |
|    | Typed Name: Jim Muhl S CK:183799 CT:326482 BH:1536397   |
|    | $\mathcal{F}$ 10 100.00 = 100.00 FOR REG ST #2  |
|    | Signature:  |
|    | ega   |
|    | Typed Name: Jim Muhl  Signature:  |

### State of Indiana Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

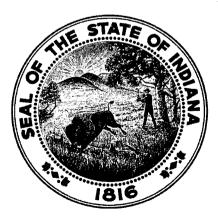
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

### **USIC LOCATING SERVICES, LLC**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on May 27, 1993, and was in existence or authorized to transact business in the State of Indiana on May 20, 2016.

I further certifiy this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, May 20, 2016

Corrie Lauron

CONNIE LAWSON
SECRETARY OF STATE

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Verify this certificate:https://bsd.sos.in.gov/ValidateCertificate