

State of Idaho



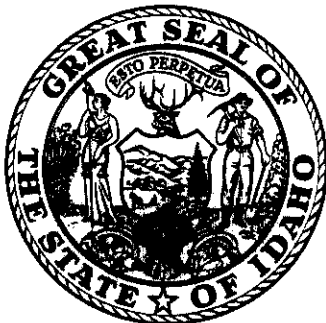
**CERTIFICATE OF AUTHORITY
OF
M. G. SKINNER & ASSOCIATES INSURANCE AGENCY, INC.**

File Number C 179617

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 Business Corporation 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: August 4, 2008



Ben Yursa

SECRETARY OF STATE

By *[Signature]*



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

08 AUG -4 AM 8:22

The undersigned Corporation applies for a Certificate of Authority and states as follows:

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the corporation is:

M. G. Skinner & associates Insurance Agency, Inc.2. The name which it shall use in Idaho is: Same3. It is incorporated under the laws of: California4. Its date of incorporation is: 12/14/1977

5. The address of its principal office is:

11030 Santa Monica Blvd. Suite 207 L.A. CA 90025

6. The address to which correspondence should be addressed, if different from item 5, is:

7. The street address of its registered office in Idaho is: 801 West Main St. Suite 100 Boise
83702and its registered agent in Idaho at that address is: Pacific Registered Agents, Inc.

8. The names and respective business addresses of its directors and officers are:

Name	Title	Business Address
<u>Michael G. Skinner</u>	<u>President</u>	<u>11030 Santa Monica Blvd.</u> <u>Los Angeles, CA 90025</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 7/21/08

Signature: _____

Typed Name: Michael G. SkinnerCapacity: President*[The signer must be a director or an officer of the corporation.]*

Customer Acct # :

(If using pre-paid account)

Secretary of State use only

g:\corpforms\corp
forms\appforauthority_profit.pmf
Revised 10/2006

0179617

IDAHO SECRETARY OF STATE
08/04/2008 05:00
CK: 5225 CT: 228463 BH: 1129964
1 @ 100.00 = 100.00 AUTH PRO # 2

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

M. G. SKINNER & ASSOCIATES INSURANCE AGENCY, INC.

FILE NUMBER: C0857279
FORMATION DATE: 12/14/1977
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to exercise
all of its powers, rights and privileges in the State of California.

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



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of August 01, 2008.

Debra Bowen

DEBRA BOWEN
Secretary of State