

State of Idaho

Office of the Secretary of State

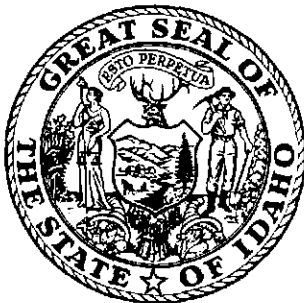
**CERTIFICATE OF REGISTRATION
OF
COBIZ INSURANCE, INC.**

File Number C 207011

I, LAWRENCE 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: August 31, 2015



Lawrence Denney
SECRETARY OF STATE

By _____

John L. Smith

202

**FOREIGN REGISTRATION STATEMENT**

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00.

Complete and submit the form in duplicate.

2015 AUG 31 PM 2:18

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the entity is: Cobiz Insurance, Inc.
2. The name which it shall use in Idaho is: _____
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:
- | | |
|--|--|
| <input checked="" type="checkbox"/> Business Corporation | <input type="checkbox"/> General Partnership |
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> General Cooperative Association |
| <input type="checkbox"/> Limited Liability Partnership | <input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership) |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust |
- ☐ Other: _____
(Use "Other" only if your foreign entity type is not listed above, and enter the type here.)
4. Jurisdiction of formation: Colorado
(Provide the domestic jurisdiction where the entity was formed)
5. The address of its principal office is:
- | | | | |
|---------------------------------|---------------|-----------|--------------|
| <u>821 - 17th Street</u> | <u>Denver</u> | <u>CO</u> | <u>80202</u> |
| (Street Address) | (City) | (State) | (Zipcode) |
| (Mailing Address, if different) | (City) | (State) | (Zipcode) |
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:
- | | | | |
|---------------------------------|---------------|-----------|--------------|
| <u>821 - 17th Street</u> | <u>Denver</u> | <u>CO</u> | <u>80202</u> |
| (Street Address) | (City) | (State) | (Zipcode) |
| (Mailing Address, if different) | (City) | (State) | (Zipcode) |
7. The mailing address to which correspondence should be addressed, if different from item 5, is:
- | | | | |
|-----------|--------|---------|-----------|
| (Address) | (City) | (State) | (Zipcode) |
|-----------|--------|---------|-----------|
8. Name and street address of registered agent in Idaho:
- | | | | | |
|--|---------------------|--------------|-----------|--------------|
| <u>United Corporate Services, Inc.</u> | <u>1215 W. Hays</u> | <u>Boise</u> | <u>ID</u> | <u>83702</u> |
| (Name) | (Address) | (City) | (State) | (Zipcode) |
9. The name, capacity, and mailing address of at least one governor:
- | *Please see attached Schedule* | | | | |
|--------------------------------|------------|-----------|--------|-------------------|
| (Name) | (Capacity) | (Address) | (City) | (State) (Zipcode) |
| (Name) | (Capacity) | (Address) | (City) | (State) (Zipcode) |

Typed Name: Marc T. McLean

Signature: _____

Capacity: President

Secretary of State use only

IDAHO SECRETARY OF STATE

08/31/2015 05:00

CK:3165790 CT:172099 BH:1490315

1@ 100.00 = 100.00 FOR REG ST #2

1@ 20.00 = 20.00 EXPEDITE C #3

C207011

COBIZ INSURANCE, INC.**DIRECTOR AND OFFICER SCHEDULE****Director Schedule**

| Name | Business Address |
|-----------------|--|
| Lyne B. Andrich | 821 - 17 th Street Denver, CO 80202 |
| Steven Bangert | 821 - 17 th Street Denver, CO 80202 |
| Scott Page | 821 - 17 th Street Denver, CO 80202 |

Officer Schedule

| Name and Title | Business Address |
|--|--|
| Marc T. McLean - President | 821 - 17 th Street Denver, CO 80202 |
| Frank B. Pugh - Exec. Vice President | 3300 North Central Avenue Phoenix, AZ 85012 |
| John D. Milek - Sr. Vice President | 821 - 17 th Street Denver, CO 80202 |
| Lyne B. Andrich - Treasurer | 821 - 17 th Street Denver, CO 80202 |
| Larry D. Mueller - Sr. Vice President | 3300 North Central Avenue Phoenix, AZ 85012 |
| Kristen Deevy - Vice President | 821 - 17 th Street Denver, CO 80202 |
| Troy Dumlao - Secretary and Sr. Vice President | 821 - 17 th Street Denver, CO 80202 |
| Kathleen Finley - Sr. Vice President | 821 - 17 th Street Denver, CO 80202 |
| Deborah Gray - Sr. Vice President | 3300 North Central Avenue Phoenix, AZ 85012 |
| Andrew W. Kallestad - Exec. Vice President | 821 - 17 th Street Denver, CO 80202 |
| Kate S. McNamara-Perreault - Vice President | 821 - 17 th Street Denver, CO 80202 |
| Jeffrey R. Smith - Sr. Vice President | 821 - 17 th Street Denver, CO 80202 |
| Jacqueline Sundstrom - Vice President | 821 - 17 th Street Denver, CO 80202 |
| David M. Bettes - Vice President | 3300 North Central Avenue Phoenix, AZ 85012 |
| Victoria Nelson - Vice President | 3300 North Central Avenue Phoenix, AZ 85012 |

Kevin M. Walker – Vice President
Nathaniel Curtis – Vice President

821 – 17th Street Denver, CO 80202
821 – 17th Street Denver, CO 80202

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

COBIZ INSURANCE, INC.

is a **Corporation** formed or registered on 02/19/1980 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19871392524.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/28/2015 that have been posted, and by documents delivered to this office electronically through 08/31/2015 @ 12:53:26.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 08/31/2015 @ 12:53:26 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 9292776.



Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."