

9/6/06/1

# State of Idaho

## Department of State

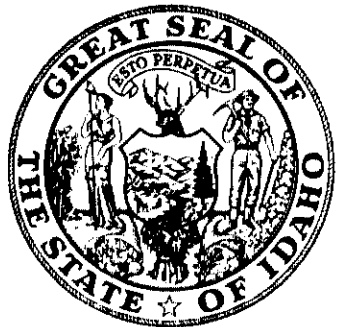
### AMENDED CERTIFICATE OF AUTHORITY OF

SP INSURANCE AGENCY, INC.

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of SP INSURANCE AGENCY, INC. for an Amended Certificate of Authority to transact business in this State, duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Amended Certificate of Authority to SP INSURANCE AGENCY, INC. to transact business in this State under the name BA INSURANCE AGENCY, INC. and attach hereto a duplicate original of the Application for such Amended Certificate.

Dated: May 23, 1994



*Pete T. Cenarrusa*  
SECRETARY OF STATE

By *Cara Sipe*

# APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

To the Secretary of State of the State of Idaho:

Pursuant to Section 30-1-118, Idaho Code, the undersigned Corporation hereby applies for an amended certificate of authority to transact business in the State of Idaho and for that purpose submits the following statement:

1. A Certificate of Authority was issued to the corporation by your office on August 14, 1991  
 19 91, authorizing it to transact business in the State of Idaho under the name of SP Insurance Agency, Inc.

2. Its corporate name has been changed to BA Insurance Agency, Inc.

*(Note: If the corporation name has not been changed, insert "No change.")*

3. The name which it shall use hereafter in the State of Idaho is BA Insurance Agency, Inc.

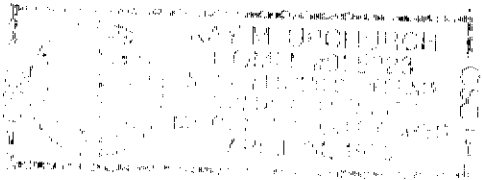
4. It desires to pursue in the transaction of business in the State of Idaho purposes other than or in addition to those set forth in its prior application for certificate of authority, as follows:  
no change

*(Note: If no additional purposes are proposed, insert "No change.")*

Dated 4-14-94 BA Insurance Agency, Inc.  
 (Corporation Name)

By Charles L. Laird  
 Its President/Vice President (please specify)

And Joan S. Bench  
 Its Secretary/Assistant Secretary (please specify)



STATE OF California )  
 ) ss:  
 COUNTY OF San Diego )

I, Kay M. Upchurch, a notary public, do hereby certify that on this 14th day of April, 19 94, personally appeared before me Charles L. Laird, who being by me first duly sworn, declared that (s)he is the Vice President of BA Insurance Agency, Inc.

Joan S. Bench  
 that (s)he signed the foregoing documents as Assistant Secretary of the corporation and that the statements therein contained are true.

Kay M. Upchurch  
 Notary Public

Submit application and filing fee to:  
 Office of the Secretary of State  
 Division of Corporations  
 Statehouse, Room 203  
 Boise, Idaho 83720

Secretary of State use only			
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Office of the Secretary of State

STATE OF DELAWARE  
JUN 20 AM 8 36

I, WILLIAM T. QUILLEN, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE CERTIFICATE OF AGREEMENT OF MERGER, WHICH MERGES:

"BA AGENCY, INC.", A CALIFORNIA CORPORATION,  
WITH AND INTO "SP INSURANCE AGENCY, INC." UNDER THE NAME OF "BA AGENCY, INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, WAS RECEIVED AND FILED IN THIS OFFICE THE THIRTIETH DAY OF JUNE, A.D. 1993, AT 3 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION SHALL BE GOVERNED BY THE LAWS OF THE STATE OF DELAWARE.



*William T. Quillen*

William T. Quillen, Secretary of State

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AUTHENTICATION: 7111884

DATE: 05-06-94

Office of the Secretary of State  
STATE

SEP 20 AM 8 36

I, WILLIAM T. QUILLEN, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "BA AGENCY, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "BA INSURANCE AGENCY, INC.", THE THIRTIETH DAY OF DECEMBER, A.D. 1993, AT 2 O'CLOCK P.M.



*William T. Quillen*  
William T. Quillen, Secretary of State

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AUTHENTICATION: 7111885

DATE: 05-06-94