State of Idaho

Office of the Secretary of State

CERTIFICATE OF REGISTRATION

OF

AVIAA INSURANCE SERVICES, LLC

File Number W 195482

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: January 22, 2018



SECRETARY OF STATE

By Ayler Hawkins

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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>.

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SECRÉTARY OF STATE STATE OF IDAHO

1.	The name of the entity is: AVIAA Insurance Services, LLC
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:
	☐ 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
	□ Other:
	(Use "Other" only if your foreign entity type is <u>not</u> listed above, and enter the type here.)
4.	Jurisdiction of formation: Utah
5.	(Provide the domestic jurisdiction where the entity was formed) The address of its principal office is:
٠.	1389 Center Drive, Suite 200, Park City, UT 84098
	(Street Address)
	(Mailing Address, if different)
6.	The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:
	1389 Center Drive, Suite 200, Park City, UT 84098
	(Street Address)
	(Mailing Address, if different)
7.	The mailing address to which correspondence should be addressed, if different from item 5, is:
•	The maining address to which correspondence should be addressed, if different from item 6, 15.
	(Address)
8.	Name and street address of registered agent in Idaho:
	InCorp Services, Inc. 1310 South Vista Ave. Suite 27, Boise, ID 83705
	(Name) (Address)
_	
9.	The name, capacity, and mailing address of at least one governor:
	James L. Hall II Manager 1520 Snow Berry Street, Park City, UT 84098
	(Name) (Capacity) (Address)
	(Name) (Capacity) (Address)
	F IDAHO SECRETARY OF STATE
	Typed Name: James L. Hall II 9 01/23/2018 05:00
	# UK:1388 CT:351450 BH:1622587
	Signature:
i	oignature
	Typed Name: James L. Hall II Signature:
	Capacity. The Control of the Control



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

12/06/2017 10586502-016012062017-3139715

CERTIFICATE OF EXISTENCE

Registration Number:

10586502-0160

Business Name:

AVIAA INSURANCE SERVICES, LLC

Registered Date:

November 10, 2017

Entity Type:

LLC - Domestic

Current Status: Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Hathy Berg

Kathy Berg Director

Division of Corporations and Commercial Code