

State of Idaho

Office of the Secretary of State

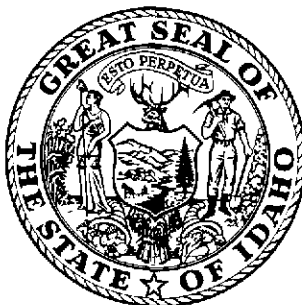
**CERTIFICATE OF REGISTRATION
OF
BLUE MOUNTAIN INSURANCE GROUP INC**

File Number C 215135

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: September 12, 2017



Lawrence Denney
SECRETARY OF STATE

By *John Reed*



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

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

Complete and submit the form in duplicate.

2017 SEP 12 PM 2:47

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the entity is: Blue Mountain Insurance Group Inc.
2. The name which it shall use in Idaho is: Blue Mountain Insurance Group Inc.
(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 not listed above, and enter the type here.)
4. Jurisdiction of formation: Oregon
(Provide the domestic jurisdiction where the entity was formed)
5. The address of its principal office is:
84763 Eastside Rd
(Street Address)
Milton-Freewater, OR 97862
(Mailing Address, if different)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:
84763 Eastside Rd
(Street Address)
Milton-Freewater, OR 97862
(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:
Dean L Cameron 700 W State St, F13, Boise, ID 83702
(Name) (Address)
9. The name, capacity, and mailing address of at least one governor:
Edward W Shinner pres. 84763 Eastside Rd Milton-Freewater, OR
(Name) (Capacity) (Address) 97862

Typed Name: Edward W Shinner

Signature: [Signature]

Capacity: President

IDAHO SECRETARY OF STATE

09/12/2017 05:00

CK:11624 CT:345511 BH:1602507
1@ 100.00 = 100.00 FOR REG ST #2
1@ 20.00 = 20.00 CORP SUR #3

C215135

State of Oregon

*OFFICE OF THE SECRETARY OF STATE
Corporation Division*

Certificate of Existence 763E924Z3

I, DENNIS RICHARDSON, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

BLUE MOUNTIAN INSURANCE GROUP INC

is

Incorporated

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



*In Testimony Whereof, I have hereunto set
my hand and affixed hereto the Seal of the
State of Oregon.*

A handwritten signature in cursive script, reading "Dennis Richardson".

DENNIS RICHARDSON, SECRETARY OF STATE

9/6/2017