

State of Idaho

Office of the Secretary of State

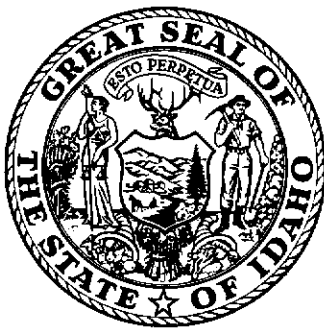
**CERTIFICATE OF AUTHORITY
OF
COMPLETE INSURANCE SOURCE, INC.**

File Number C 193989

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: March 8, 2012



Ben Yursa
SECRETARY OF STATE
By *[Signature]*



**APPLICATION FOR CERTIFICATE
OF AUTHORITY (For Profit)**
(Instructions on Back of Application)

2012 MAR -8 AM 9:41
SECRETARY OF STATE
STATE OF IDAHO

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

- 1. The name of the corporation is:
COMPLETE INSURANCE SOURCE, INC.
- 2. The name which it shall use in Idaho is: COMPLETE INSURANCE SOURCE, INC.
- 3. It is incorporated under the laws of: FLORIDA
- 4. Its date of incorporation is: 08/28/2000
- 5. The address of its principal office is:
111 W. JEFFERSON STREET, SUITE 100, ORLANDO, FLORIDA 32801
- 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: 1423 Tyrell Lane, Boise, Idaho 83706
and its registered agent in Idaho at that address is: National Registered Agents, Inc.
- 8. The names and respective business addresses of its directors and officers are:

Name	Title	Business Address
<u>Scott Carver</u>	<u>President</u>	<u>111 W Jefferson St. Orlando, FL 32801</u>
<u>Shane Streufert</u>	<u>Secretary, Treasurer</u>	<u>111 W Jefferson St. Orlando, FL 32801</u>
<u>Dayne Williams</u>	<u>CEO, Director</u>	<u>111 W Jefferson St. Orlando, FL 32801</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 3/7/12

Signature: Shane Streufert National Registered Agents, Inc.

Typed Name: Shane Streufert

Capacity: Secretary, Treasurer
[The signer must be a director or an officer of the corporation.]

Customer Acct # : _____
(if using pre-paid account)

Secretary of State use only

IDAHO SECRETARY OF STATE
03/08/2012 05:00
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Revised 06/2005

Web Form

C193989

State of Florida

Department of State

Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capital, this the Second day of March, 2012

I certify from the records of this office that COMPLETE INSURANCE SOURCE, INC. is a corporation organized under the laws of the State of Florida, filed on August 28, 2000.

The document number of this corporation is P00000081125.

I further certify that said corporation has paid all fees due this office through December 31, 2011, that its most recent annual report was filed on April 5, 2011, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Ken Detjen
Secretary of State

*Given under my hand and the Great Seal of
Florida, at Tallahassee, the Capital, this the
Second day of March, 2012*

Ken Detjen

Secretary of State



Authentication ID: 600223605016-030212-P00000081125

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

<https://efile.sunbiz.org/certauthver.html>