

# State of Idaho

Office of the Secretary of State

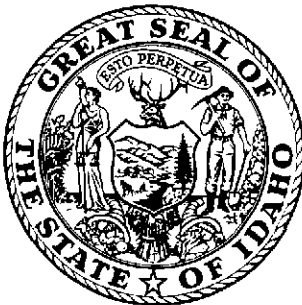
**CERTIFICATE OF REGISTRATION  
OF  
NATIONAL CLAIM SERVICES, INC.**

File Number C 215074

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 7, 2017



*Lawrence Denney*  
SECRETARY OF STATE

By *Sherry Perkins*



# 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 -7 PM 4:50

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the entity is: National Claim Services, Inc.
2. The name which it shall use in Idaho is: \_\_\_\_\_
3. Select the type of entity you wish to register: (If other, please leave only if you are required to adopt an alternative name.)

|   |  |
|---|--|
| <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           |
| <input type="checkbox"/> Other: _____<br><small>(Use "Other" only if your foreign entity type is not listed above and enter the type here.)</small> |  |
4. Jurisdiction of formation: Georgia  
(Provide the domestic jurisdiction where the entity was formed.)
5. The address of its principal office is:  
365 Northridge Rd, Ste 400, Atlanta, GA 30350  
(If not applicable, leave blank.)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:  
365 Northridge Rd, Ste 400, Atlanta, GA 30350  
(If not applicable, leave blank.)
7. The mailing address to which correspondence should be addressed, if different from item 5, is:  
\_\_\_\_\_  
(If not applicable, leave blank.)
8. Name and street address of registered agent in Idaho:  
Incorp Services, Inc. 1524 S Vista Ave, Ste 12, Boise, ID 83705  
(Name) (Address)
9. The name, capacity, and mailing address of at least one governor:  

|                         |                           |  |
|-------------------------|---------------------------|--|
| <u>Andrew C. Heaner</u> | <u>President</u>          | <u>365 Northridge Rd, Ste 400, Atlanta, GA 30350</u> |
| <small>(Name)</small>   | <small>(Capacity)</small> | <small>(Address)</small>                             |

Typed Name: Andrew C Heaner

Signature: ACH

Capacity: President

Secretary of State use only

IDAHO SECRETARY OF STATE

09/08/2017 05:00

CK:1814 CT:274779 BH:1601883

1@ 100.00 = 100.00 FOR REG ST #2

C215074

# STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

## CERTIFICATE OF EXISTENCE

I, **Brian P. Kemp**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### NATIONAL CLAIM SERVICES, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 14886307  
Date Inc/Auth/Filed: 10/03/2008  
Jurisdiction : Georgia  
Print Date : 08/25/2017  
Form Number : 211



Brian P. Kemp  
Secretary of State