

# State of Idaho

Office of the Secretary of State

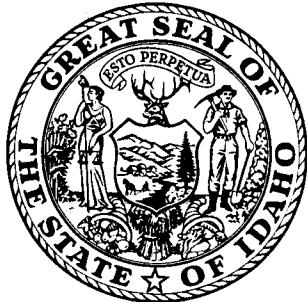
**CERTIFICATE OF REGISTRATION  
OF  
RIVERBEND INSURANCE CORP**

File Number C 210627

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.

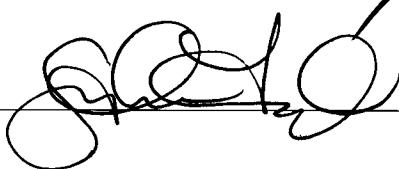
ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: July 27, 2016



  
Lawrence Denney  
SECRETARY OF STATE

By





# FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

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

Complete and submit the form in duplicate.

2016 JUL 27 AM 9:08

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the entity is: Riverbend Insurance Corp

2. The name which it shall use in Idaho is: \_\_\_\_\_

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: \_\_\_\_\_  
(Please type only if your foreign entity type is not listed above, and enter the type here.)

4. Jurisdiction of formation: WA \_\_\_\_\_  
(Provide the corporate jurisdiction where the entity was formed.)

5. The address of its principal office is:  
118 S. Washington St. Newport, WA 99156  
(Principal Address)

6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:  
118 S. Washington St. Newport, WA 99156  
(Domestic Address)

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. Fl 3, Boise, ID 83702  
(Name)      (Address)

9. The name, capacity, and mailing address of at least one governor:  
Kevin Wright      President      118 S Washington St. Newport, WA 99156  
(Name)      (Capacity)      (Address)  
Cara Wright      Vice Presider 118 S Washington St. Newport, WA 99156  
(Name)      (Capacity)      (Address)

Typed Name: Kevin Wright

Signature:

Capacity: President

Secretary of State use only

IDaho SECRETARY OF STATE  
**07/27/2016 05:00**  
**CK:2015 CT:327224 BH:1539349**  
**1@ 100.00 = 100.00 FOR REG ST #2**

**C210627**

UNITED STATES OF AMERICA

# The State of Washington



## Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

### CERTIFICATE OF EXISTENCE OF RIVERBEND INSURANCE CORP

I FURTHER CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 6/20/2016.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest and penalties owed to this state and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Date: July 20, 2016

UBI: 604-008-198

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

A handwritten signature in black ink that reads "Kim Wyman".

Kim Wyman, Secretary of State

