

State of Idaho

Office of the Secretary of State

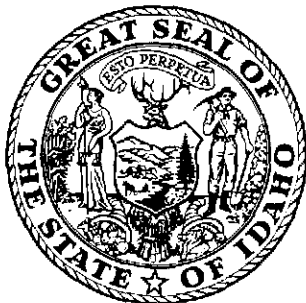
**CERTIFICATE OF REGISTRATION
OF
RIVER POINT INSURANCE SERVICES, LLC**

File Number W 181892

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: April 17, 2017



Lawrence Denney
SECRETARY OF STATE

By *[Signature]*



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

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

Complete and submit the form in duplicate.

2017 APR 17 AM 10:24

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the entity is: River Point 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
- Nonprofit Corporation
- Limited Liability Partnership
- Limited Liability Company
- General Partnership
- General Cooperative Association
- Limited Partnership (Including a limited liability limited partnership)
- 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: Illinois
(Provide the domestic jurisdiction where the entity was formed)

5. The address of its principal office is:
8770 W. Bryn Mawr Ave., Suite 1000, Chicago, IL 60631-3516
(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:
8770 W. Bryn Mawr Ave., Suite 1000, Chicago, IL 60631-3516
(Street Address)

(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:
Idaho DOI Director, Dean L. Camero 700 W. State St., Fl 3, Boise, ID 83702
(Name) (Address)

9. The name, capacity, and mailing address of at least one governor:
Vincent A. DiBenedetto Managing 560 W. Fulton St., #601, Chicago, IL 60661
(Name) (Capacity) (Address)
Member

Typed Name: Vincent A. DiBenedetto

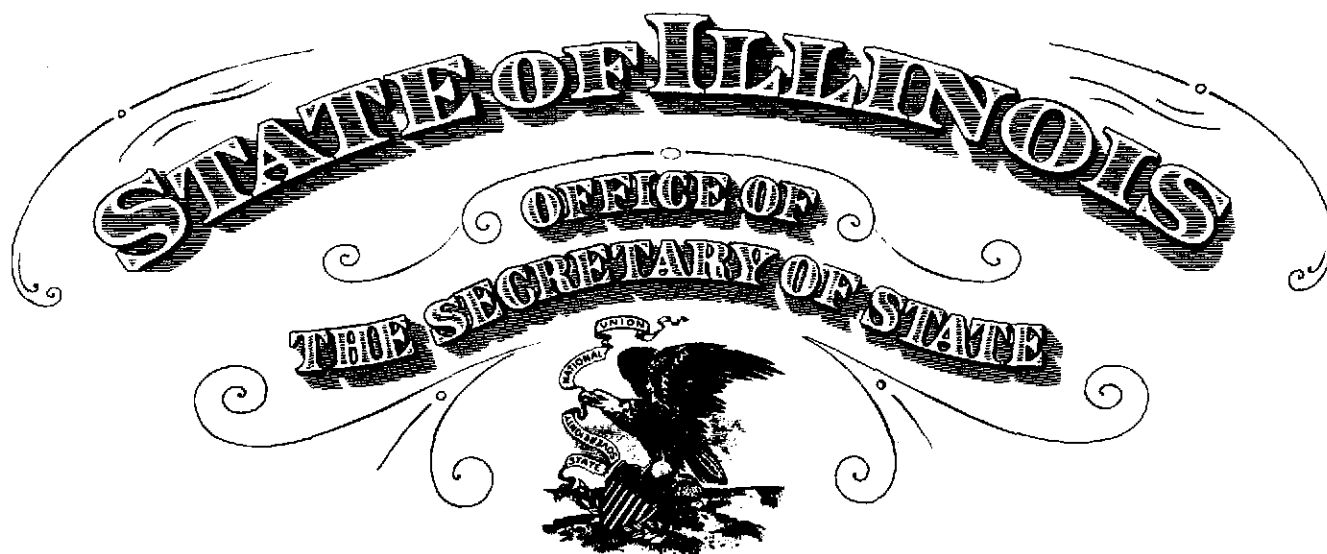
Signature:

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/17/2017 05:00
CK:1086 CT:338162 BH:1579712
1@ 100.00 = 100.00 FOR REG ST #2

W181892



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

RIVER POINT INSURANCE SERVICES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JANUARY 08, 2016, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 30TH day of MARCH A.D. 2017 .

Jesse White

SECRETARY OF STATE