

CERTIFICATE OF AUTHORITY OF

WERNER INSURANCE, INC.

duplicate originals of an Application of WERNER THEURANCE, INC.
for a Certificate of Authority to transact business in this State
duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have
been received in this office and are found to conform to law.
ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate o
Authority to
to transact business in this State under the name MERNER INSURANCE, INC.
and attach hereto a duplicate original of the Application
for such Certificate.
Dated August 26, 1991

Pet or Cina

SECRETARY OF STATE

APPLICATION FOR CERTIFICATE OF AUTHORITY

(Profit Corporation)

he Secretary of State of Idaho	RECEIVED
Pursuant to Section 30-1-110, Idaho Code, the undersigned Corporati	on hereby applies for a Cortificate of
thority to transact business in your State, and for that purpose submits to the corporation is <u>Werner Insura</u>	he following statement:
The name of the corporation is Werner Insur	ance Inc
	•
The name which it shall use in Idaho is Worner Fr	ISUVANCE, Inc.
The name which is shall use in tually is	
(To be used only when required to avoid a conflict with a name alread Board of Directors resolution adopting assumed name in Idaho.)	y on file. Must be accompanied by a
· · · · · · · · · · · · · · · · · · ·	
It is incorporated under the laws of Washing fur	1 Hate
The date of its incorporation is May 15, 1991	
	and the period of its duration
is perpetual	•
	•
The address of its principal office in the state or country under the laws	of which it is incorporated is
309 S. Washington,	Alexant. WA 99156
	<i>I</i> '
The address to which correspondence should be addressed, if different fi	for that in item 3.
	7 Sherman # 202
Coour d'Alene, ID 83814	, and the name of its proposed
,	
registered agent in Idaho at that address is E. W. Haig.	
The purpose or purposes which it proposes to pursue in the transaction	of business in Idaho are:
insurance sales au	ed all
other lawful busin	4155
The names and respective addresses of its directors and officers are:	
Name Office	Address
who D. Worner Director Preside P.O. B. athryn K. Weiner Director Vice Ro. P.D. B	BAX 1080 New DON WAGG
	2 and and a second
athryn K. Weiner Director Vica Mrs. V.D. B	1 × 1060, Newfort, WA 941
	•
·	
· ·	(continued on reverse)

Name	Office	Address
	-	
		•
lo.		
		and the second s
		orate Status or Existence, duly authenticated by the laws of which it is incorporated.
Dated: 8/22/9/	de dis	
,	Wei	(Corporation Name)
	***************************************	(Corporation Name)
	By <u>(5. W.</u>	Haight / J.W. Hans
	<i>t</i> 0 1	ts, President / Vice President (please specify)
1	and /(· U· //	ts, Secretary Assistant Secretary (please specify)
TATE OF Josho)	LACTING Assistant
OUNTY OF Hostenes) ss:)	
•		, a notary public, do hereby certify that on
is 22 and day	· August	, 19 <u>1/</u> , personally appeared before
	61	, 19, personally appeared before
de C.W. Harge		who being by me first duly sworn, declared that (s)he
the Acting Vice Pre	sidenst Wa	erner Insuvona, In
nat (s)he signed the foregoing docu	ment as the acting	Vice Pieside of the corporation and that
ne statements therein contained are	true.	
	and the second second	
	· A	VIII Ders-
		Notary Public



SEC. OF STATE

91 AUG 26 PM 5 13

STATE of WASHINGTON SECRETARY of STATE

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

WERNER INSURANCE, INC.

I, RALPH MUNRO, Secretary of State of the State of Washington, hereby certify that I am the custodian of the corporation records of this state.

I FURTHER CERTIFY that the records on file in this office show that the above - named profit corporation was incorporated under the laws of the State of Washington and was issued a certificate of incorporation in Washington on May 15, 1991.

I FURTHER CERTIFY that as of the date of this certificate no Articles of Dissolution or Certificate of Withdrawal have been filed, that the conditions of the Revised Code of Washington, Title 23B.01.280(2) (a) through (d) have been met, and the corporation is duly authorized to transact business in the corporate form in the State of Washington.

Date: August 14, 1991
Given under my hand and the seal of the State of Washington, at Olympia, the State Capitol.

Ralph Munro, Secretary of State

E. Kelly

SSF69A(R5/91)