



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed).

For Office Use Only

-FILED-

File #: 0006200955

Date Filed: 3/27/2025 1:43:00 PM

1. The name of the entity is: Assurant Home Solutions, Inc.
2. The name which it shall use in Idaho is: Assurant Home Solutions, Inc.
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:

<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: _____ (Use "Other" only if your foreign entity type is not listed above, and enter the type here.)	

4. Jurisdiction of formation: Georgia
(Provide the domestic jurisdiction where the entity was formed)

5. The address of its principal office is:
260 Interstate N Circle SE, Atlanta, GA 30339
(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:
260 Interstate N Circle SE, Atlanta, GA 30339
(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:
Corporation Service Company 1305 12th Avenue Road, Nampa, ID 83686
(Name and Address)

9. The name, capacity, and mailing address of at least one governor:

<u>Jeannie Aragon-Cruz</u>	<u>Secretary</u>	<u>701 Waterford Way, Suite 600 Miami, FL 33126</u>
(Name)	(Capacity)	(Address)

(Name) (Capacity) (Address)

Secretary of State use only

Typed Name: Jeannie Aragon-Cruz

Signature: 

Capacity: Secretary

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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, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Assurant Home Solutions, 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 : 29083103
Date Inc/Auth/Filed: 03/17/2025
Jurisdiction : Georgia
Print Date : 03/26/2025
Form Number : 211



Brad Raffensperger

Brad Raffensperger
Secretary of State

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