

# State of Idaho

Office of the Secretary of State

## AMENDED CERTIFICATE OF REGISTRATION

OF

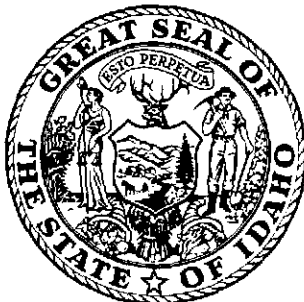
**FORSYTH COLORADO LLC**

File Number W 151337

I, LAWRENCE DENNEY, Secretary of the State, hereby certify that an Application for Amended Foreign Registration 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 Amended Certificate of Foreign Registration to reflect the name change from FORSYTH COLORADO LLC to **EBERL CLAIMS SERVICE LLC** and attach hereto a duplicate of the application for such amended certificate.

Dated: September 3, 2015



*Lawrence Denney*  
SECRETARY OF STATE

By \_\_\_\_\_

*Julie Loring*



# AMENDMENT OF FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$30.00.

Complete and submit the application in duplicate.

2015 SEP -3 PM 2:31

SECRETARY OF STATE  
STATE OF IDAHO

1. Entity name: Forsyth Colorado LLC

2. The entity name is amended to: Eberl Claims Service LLC

a. If the new name is not available or permissible in Idaho, the name to be used in Idaho is:

\_\_\_\_\_

3. The entity type is amended to:

- |  |  |
|--|--|
| <input 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: _____                  |  |

(If newly created foreign entity type name)

4. The entity's jurisdiction is amended to: \_\_\_\_\_

5. The street and mailing address(es) of its principal office is amended to:

\_\_\_\_\_  
(City) (State) (Zipcode)

\_\_\_\_\_  
(City) (State) (Zipcode)

Typed Name: William Kyle Chapman

Signature: [Signature]

Capacity: President

Secretary of State use only

IDAHO SECRETARY OF STATE

09/03/2015 05:00

CK: PREPAID CT:1157 BH:1490896

1@ 30.00 = 30.00 AMD FOR RE #2

1@ 20.00 = 20.00 EXPEDITE C #3

W151337

**Application for Amended Certificate of Authority**

***Name and address of the Managers:***

<b>Managers</b>	<b>Address</b>
William Kyle Chapman	8040 Forsyth Blvd., St. Louis, MO 63105
Ryan L. Gable	8040 Forsyth Blvd., St. Louis, MO 63105
John Quinn	8040 Forsyth Blvd., St. Louis, MO 63105
Patrick McLaughlin	8040 Forsyth Blvd., St. Louis, MO 63105

# STATE OF MISSOURI



Jason Kander  
Secretary of State

## CERTIFICATE OF FACT

I, JASON KANDER, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody as Secretary of State show that

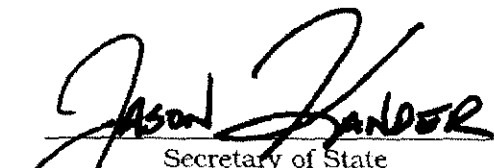
*Eberl Claims Service LLC*  
*LC001441792*

was created under the Laws of the State of Missouri on the 1st day of April, 2015.

I further certify that on the 31st day of August, 2015, Articles of Amendment was filed changing the name from Forsyth Colorado LLC to Eberl Claims Service LLC

I further certify that Eberl Claims Service LLC has the status of Active with this office as of the date of this certificate.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 1st day of September, 2015.

  
Secretary of State



Certification Number: CERT-09012015-0083