State of Idaho

Department of State

CERTIFICATE OF AUTHORITY
OF

ROGERS BENEFIT GROUP, INC.

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of ROGERS BENEFIT GROUP, 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 of Authority to ROGERS BENEFIT GROUP, INC. to transact business in this State under the name ROGERS BENEFIT GROUP, INC. and attach hereto a duplicate original of the Application for such Certificate.

Dated: January 28, 1994



Fite of Enavusa
SECRETARY OF STATE

By ara Seifel

APPLICATION (Profit Corporation) ON FOR CERTIFICATE OF AUTHORITY To the Secretary of State of Idalic & Pursuant to Section 30-1-110, Idaho Gode, the undersigned Corporation hereby applies for Conficate of Authority to transact business in your State, and for that purpose submits the following statement: 1. The name of the corporation is ROGERS BENEFIT GROUP, INC. 2. The name which it shall use in Idaho is ROGERS BENEFIT GROUP, INC. (To be used only when required to avoid a conflict with a name already on file. Must be accompanied by a Board of Directors resolution adopting assumed name in Idaho.) 3. It is incorporated under the laws of __Minnesota_ 4. The date of its incorporation is $\frac{11-6-87}{}$ and the period of its duration, if other than perpetual, is_____ 5. The address of its principal office in the state or country under the laws of which it is incorporated is 1450 Interchange Tower, 600 South Highway 169, Minneapolis, Minnesota 55426-1278 6. The address to which correspondence should be addressed, if different than item 5, is 7. The street address of its proposed registered office in Idaho is 300 North 6th Street Boise, Idaho 83701 _____, and the name of its proposed registered agent in Idaho at that address is _____ C_T_CORPORATION_SYSTEM 8. The purpose or purposes which it is proposed to pursue in the transaction of business in Idaho are: Sell and service group and individual health, dental, life and disability

(Continued on reverse)

insurance.

ACA593

Submit applications and certificate of status to:

Office of the Secretary of State
Division of Corporations
Statehouse, Room 203
*Boise, Idaho 83720

Secretary of State use only

Fee: \$100 if typed with no attachments \$120 if not typed or if attachments are included

Name	Office		Address '
John E. Rogers	President/Treasurer	755 Tonkawa	Road, Long Lake, MN 55356
James P. Rogers	**	55426-178	
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SEC. OF STATE OF MINNESOTA

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SECRETARY OF STATE

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Certificate of Good Standing

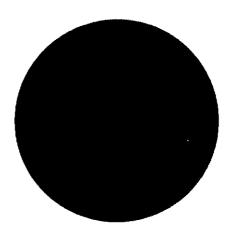
I, Joan Anderson Growe, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Rogers Benefit Group, Inc.

Date Formed: 11/06/1987

Chapter Governed By: 302A

This certificate has been issued on 01/20/94.



Joan auderson Grove
Secretary of State.