

State of Idaho

Office of the Secretary of State

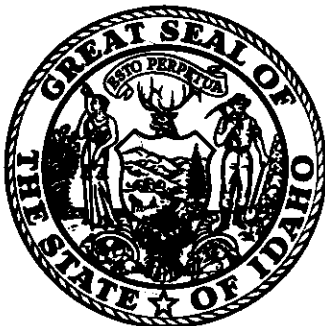
**CERTIFICATE OF AUTHORITY
OF
C.H. INSURANCE BROKERAGE SERVICES CO., INC.**

File Number C 201168

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, 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 Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: February 13, 2014



Ben Yursa

SECRETARY OF STATE

By *Constance L.*



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2014 FEB 13 AM 9:36

The undersigned Corporation applies for a Certificate of Authority and states as follows:

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the corporation is:
C.H. Insurance Brokerage Services Co., Inc.
2. The name which it shall use in Idaho is: _____
3. It is incorporated under the laws of: New York
4. Its date of incorporation is: 1/3/90
5. The address of its principal office is:
100 Madison Street, Suite 100, Syracuse, NY 13202-2704
6. The address to which correspondence should be addressed, if different from item 5, is:

7. The street address of its registered office in Idaho is: 700 W State Fl 3, Boise, ID 83702
and its registered agent in Idaho at that address is: Idaho Depart. of Insurance Director, Bill Deal
8. The names and respective business addresses of its directors and officers are:

Name	Title	Business Address
<u>Joseph Convertino</u>	<u>Pres, Treasurer, Dir</u>	<u>100 Madison St, Ste 100, Syracuse, NY 13202-2704</u>
<u>Joseph Convertino, Jr</u>	<u>Vice Pres, Sec, Dir</u>	<u>100 Madison St, Ste 100, Syracuse, NY 13202-2704</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 2/12/14

Signature: Joseph Convertino

Typed Name: Joseph Convertino

Capacity: President
[The signer must be a director or an officer of the corporation.]

Customer Acct #:

(if using pre-paid account)

Secretary of State use only

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Revised 06/2005

IDAHO SECRETARY OF STATE
02/13/2014 05:00
CX: 3511 CT: 292949 BH: 1410584
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201168

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of C.H. INSURANCE BROKERAGE SERVICES CO., INC. was filed on 01/03/1990, under the name of R.M.S.C.O. SERVICES INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment R.M.S.C.O. SERVICES INC., changing its name to C.H. INSURANCE BROKERAGE SERVICES CO., INC., was filed 12/01/1999.



*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 07th day of February two
thousand and fourteen.*

Anthony Giardina

Executive Deputy Secretary of State