



0003476402



STATE OF IDAHO
Office of the secretary of state, Lawrence Denney
FOREIGN REGISTRATION STATEMENT (LIMITED LIABILITY COMPANY)

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301
Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

File #: 0003476402

Date Filed: 4/11/2019 3:07:13 PM

Foreign Registration Statement (Limited Liability Company)							
Standard or Expedited Service (select one)	Standard (filing fee \$100)						
1. The name this limited liability company will use in Idaho is:							
Entity name	Clemens Insurance Agency, LLC						
2. Home Jurisdiction							
The jurisdiction of formation is:	KANSAS						
3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:							
Street Address	401 N 16TH ST PARSONS, KS 67357						
4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:							
Mailing Address	401 N 16TH ST PARSONS, KS 67357						
5. The complete street address of the principal office is:							
Principal Office Address	401 N 16TH ST PARSONS, KS 67357						
6. The mailing address of the principal office is:							
Mailing Address	401 N 16TH ST PARSONS, KS 67357-3123						
7. Registered Agent Name and Address							
Registered Agent	DEAN L CAMERON Registered Agent Physical Address 700 W STATE ST FL3 ID DEPT OF INSURANCE BOISE, ID 83702 Mailing Address						
8. Governors							
<table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Address</th> </tr> </thead> <tbody> <tr> <td>Jerry W Clemens</td> <td>Sole Member</td> <td>401 N 16TH ST PARSONS, KS 67357-3123</td> </tr> </tbody> </table>		Name	Title	Address	Jerry W Clemens	Sole Member	401 N 16TH ST PARSONS, KS 67357-3123
Name	Title	Address					
Jerry W Clemens	Sole Member	401 N 16TH ST PARSONS, KS 67357-3123					
Signature of individual authorized by the entity to sign:							
<i>June Brooks</i>	<u>04/18/2019</u>						
Sign Here	Date						
Signer's Title: Office Manager							
Print & Mail Enclosures							
Certificate of Existence/Good Standing from the State in which this entity was originally formed dated within 90 days of today.							
Payment in the amount of \$100.00 (if expedited, \$120) - checks payable to the Secretary of State, signed and recently dated.							
This filing form (submit within 30 days) with the required signature(s).							

B0232-5360 04/18/2019 2:26 PM Received by ID Secretary of State Lawrence Denney

B02332-5361 04/18/2019 2:26 PM Received by ID Secretary of State Lawrence Denney

**STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
SCOTT SCHWAB**

I, SCOTT SCHWAB, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 5196555

Entity Name: CLEMENS INSURANCE AGENCY, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: JERRY W. CLEMENS

Registered Office: 401 N 16TH ST., PARSONS, KS 67357

was filed in this office on April 26, 2018, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of April 11, 2019

**SCOTT SCHWAB
SECRETARY OF STATE**

Certificate ID: 1098660 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.