State of Idaho

Office of the Such that of State

CERTIFICATE OF AUTHORITY

OF

BOYLES MOAK BRICKELL MARCHETTI INSURANCE, INC.

File Number C 164125

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: 23 December 2005



Ben yeura SECRETARY OF STATE



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2005 DEC 23 AM 9: 09

Th	e undersigned Corporation applies for a	Certificate of Authority	and states as follows: SECRETARY OF STATE
1.			STATE OF IDAHO
	Boyles Moak Brickell Ma	rchetti Insuranc	e, Inc.
2.	The name which it shall use in Idaho is	s: Boyles Moak	Brickell Marchetti Insurance, Inc.
3.	It is incorporated under the laws of: _	Mississippi	
4.	Its date of incorporation is:	9/6/1994	
5.	The address of its principal office is:		
	1062 Highland Colony Par	kway, SUite 100,	Ridgeland MS 39157
6.	The address to which correspondence P O Box 2240, Ridgeland,	e should be addressed, MS 39158-2240	if different from item 5, is:
7.	The street address of its registered offi	ce in Idaho is:, C. T	. Corporate Systems
	and its registered agent in Idaho at tha		
	3 3	-	
8.	The names and respective business ac	ddresses of its directors	and officers are:
	Name	Office	Address
	See attached list	,	
		•	
		 	
Dat	red: 12/20/05		Customer Acct # :
Sig	nature: Am & Micht		(if using pre-paid account) Secretary of State use only
Тур	pedName: John E. Marchet	ti	IDAHO SECRETARY OF STATE 1 2 / 2 3 / 2 0 0 5 = 0 0 CK: 16546 CT: 195259 BH: 926371 1 9 109.00 = 100.00 AUTH PRO # 2
Cap	pacity: President	area man artis since a facilitati and a sance a sance a	IDAHO SECRETARY OF STATE 12/23/2005 05:00 CK: 16546 CT: 195259 BH: 928371 1 9 100.00 = 100.00 AUTH PRO # 2

Boyles Moak Brickell	Boyles Moak Brickell Marchetti Insurance, Inc.	Ċ	(10/04)	_	
Name	Title	Address	City	State	Zip
John E. Marchetti	President	2240 Culleywood Rd.	Jackson	MS	39211
Derwood R. Boyles	Senior Vice Pres.	5510 River Thames Rd.	Jackson	MS	39211
H. Andy Moak	Senior Vice Pres	5820 Lake Trace Cir.	Jackson	MS	39211
G. Richard Greenlee	Senior Vice Pres.	6 East Hill	Jackson	MS	39216
J. Durr Boyles	Senior Vice Pres.	5334 Carolwood Dr.	Jackson	MS	39211
J. Robert Ford	Vice President	114 Trace Ridge	Clinton	MS	39056
David Ray Robertson	Exec. Vice Pres	4624 Friar Circle	Jackson	MS	39211
John A. Bernamonti	Secretary/Treasurer	307 Avonlea Lane	Madison	S	39110
Note: All Officers are Directors	Directors				
:	:				

State of Mississippi

Office of the Secretary of State Eric Clark, Secretary of State Jackson, Mississippi

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on September 6, 1994, the State of Mississippi issued a Charter/Certificate of Authority to:

BOYLES MOAK BRICKELL MARCHETTI INSURANCE, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is 99 years.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand and seal of office December 19, 2005

ric Clark

ERIC CLARK
Secretary of State

Certification Number: 7615417-1 Page 1 of 1 Reference: Verify this certificate online at http://www.sos.state.ms.us/busserv/corp/verify