

IDAHO SECRETARY OF STATE

11/14/2017 05:00

CK:3011750173 CT:342426 BH:1612049

1/3 30.00 = 30.00 AMEND PROF #3

FILED EFFECTIVE

2017 NOV 29 AM 10:36

SECRETARY OF STATE
STATE OF IDAHO

**CERTIFIED COPY OF
RESOLUTIONS OF THE SHAREHOLDERS OF
FARMERS INSURANCE COMPANY OF IDAHO**

June 7, 2017

WHEREAS, the location of the Pocatello, Idaho office has changed; and

WHEREAS, it is appropriate that the Stockholders amend the Articles of Incorporation to update the location of the Company's registered office;

NOW THEREFORE BE IT RESOLVED, that the directors, officers and employees of the Company be, and hereby are, authorized and directed to amend Article IV of the Articles of Incorporation to read as follows:

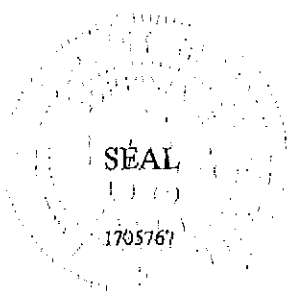
**ARTICLE IV
LOCATION OF REGISTERED OFFICE**

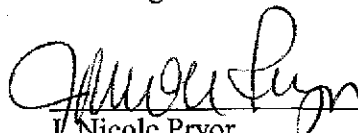
The registered office and post office address of the corporation shall be 122 Vista Drive, Pocatello, Idaho, which shall be the principal and home office of the corporation. The corporation may establish branches in any other part of the State of Idaho, in any other state or territory of the United States, or the District of Columbia, and in any other place or places where the corporation is qualified to do business.

FURTHER RESOLVED, that all actions previously taken by any officer or director of the Company in connection with the foregoing resolutions are hereby approved, adopted, ratified and confirmed in all respects, and that the directors, officers and employees of the Company shall be, and hereby are, authorized and directed to take all actions necessary or appropriate to effectuate the foregoing resolutions.

SECRETARY'S CERTIFICATE

I, J. Nicole Pryor, certify that I am the duly elected Assistant Secretary of Farmers Insurance Company of Idaho, an Idaho corporation, and that the foregoing resolutions were duly adopted via unanimous written consent dated June 7, 2017 by the Shareholders of Farmers Insurance Company of Idaho, and said resolutions have not been changed or modified and are in full force and effect as of the date of this certification.




J. Nicole Pryor
Assistant Secretary

Dated: 6/27/17

C 41588

CALIFORNIA JURAT WITH AFFIANT STATEMENT**GOVERNMENT CODE § 8202**

- ☐ See Attached Document (Notary to cross out lines 1-6 below)
☐ See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

Signature of Document Signer No. 1 Signature of Document Signer No. 2 (if any)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

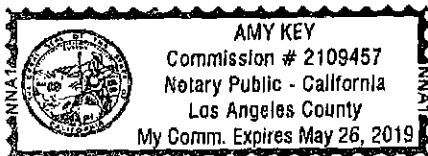
County of Los Angeles

Subscribed and sworn to (or affirmed) before me

on this 21th day of June, 20 17
by Date Month Year(1) Jennifer Nicole Pryor

(and (2) _____).

Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence
to be the person(s) who appeared before me.

Seal
Place Notary Seal Above

Signature Amy Key
Signature of Notary Public

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached DocumentTitle or Type of Document: certified copy FCO-IP
copies of resolution Document Date: 6/27/17Number of Pages: 1 Signer(s) Other Than Named Above: None