

# State of Idaho

Office of the Secretary of State

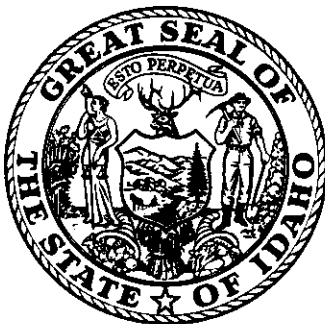
**CERTIFICATE OF AUTHORITY  
OF  
DRIVER ALLIANT INSURANCE SERVICES, INC.**

File Number C 148401

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: 27 March 2003



*Ben Ysursa*  
SECRETARY OF STATE

By *Monica Okelberry*



# APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2003 MAR 27 AM 8:43

SECRETARY OF STATE  
STATE OF IDAHO

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

1. The name of the corporation is:

DRIVER ALLIANT INSURANCE SERVICES, INC.

2. The name which it shall use in Idaho is: DRIVER ALLIANT INSURANCE SERVICES, INC.

3. It is incorporated under the laws of: Delaware

4. Its date of incorporation is: November 12, 1997

5. The address of its principal office is:

1620 Fifth Avenue, San Diego, CA 92101-2797

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: 1423 Tyrell Lane, Boise ID 83706

and its registered agent in Idaho at that address is: National Registered Agents, Inc.

8. The names and respective business addresses of its directors and officers are:

Name	Office	Address
<u>Please see list attached.</u>		

Dated: 3/17/03

Signature: Andrea M. Calabrese

Typed Name: Andrea M. Calabrese

Capacity: Vice President, Assistant Secretary

Customer Acct # :

(if using pre-paid account)

Secretary of State use only

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Revised 07/2002

IDAHO SECRETARY OF STATE  
03/27/2003 05:00  
CK: 70829 CT: 168651 BH: 671186  
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C148401

**Attachment to Application for Certificate of Authority  
for  
DRIVER ALLIANT INSURANCE SERVICES, INC.**

**8 . The Name(s) and business address(es) of its OFFICERS AND DIRECTORS:**

<u>NAME AND TITLE</u>	<u>BUSINESS ADDRESS</u>
Thomas W. Corbett Chairman/CEO/Director	5800 Armada Drive, #200 Carlsbad, CA 92008
John Addeo Vice Chairman	6 Suburban Avenue Stamford, CT 06901
Jerold D. Hall President/COO/Director	5800 Armada Drive, #200 Carlsbad, CA 92008
Paul Orzech Executive Vice President/Director	6 Suburban Avenue Stamford, CT 06901
William Robinson Executive Vice President/Director	6 Suburban Avenue Stamford, CT 06901
P. Gregory Zimmer, Jr. EVP/CFO/Director	5800 Armada Drive, #200 Carlsbad, CA 92008
John P. Iacono FVP/Secretary/Director	6 Suburban Avenue Stamford, CT 06901
Charles S. Tyson FVP/Treasurer	5800 Armada Drive, #200 Carlsbad, CA 92008
Andrea Calabrese Vice President/Assistant Secretary	1620 Fifth Avenue San Diego, CA 92101

# Delaware

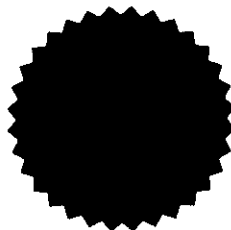
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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DRIVER ALLIANT INSURANCE SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF JANUARY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DRIVER ALLIANT INSURANCE SERVICES, INC." WAS INCORPORATED ON THE TWELFTH DAY OF NOVEMBER, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 2193020

030014001

DATE: 01-08-03