





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

ldaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only



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Foreign Registration Statement (Limited Select one: Standard, Expedit descriptions below)		vice (see Standard (filing fee \$100)		
1. The name this limited liability company	/ will use in Idaho is:			
Type of Limited Liability Compa	any	Foreign Limited Liability Company		
Entity name		Alliance Risk Insurance Services LLC		
Alliance Risk Insurance Service	es LLC			
2. Home Jurisdiction				
The jurisdiction of formation is:		NEW YORK		
3. The street address of its domestic prin	cipal office (if required by	the laws of the jurisdiction of formation) is:		
Street Address		2209 E 21ST ST		
		BROOKLYN, NY 11229		
4. The mailing address of its domestic pr	incipal office (if required b	y the laws of the jurisdiction of formation) is:		
Mailing Address		2209 E 21ST ST		
Ŭ		BROOKLYN, NY 11229-3637		
5. The complete street address of the pri	ncipal office is:			
Principal Office Address		2209 E 21ST ST		
		BROOKLYN, NY 11229		
6. The mailing address of the principal of	fice is:			
Mailing Address		2209 E 21ST ST		
-		BROOKLYN, NY 11229		
7. Registered Agent Name and Address				
Registered Agent		PARACORP INCORPORATED		
		Commercial Registered Agent		
		Physical Address		
		1555 W SHORELINE DR		
		STE 100		
		BOISE, ID 83702		
		Mailing Address		
		1555 W SHORELINE DR		
		STE 100		
		BOISE, ID 83702		
I affirm that the registered	agent appointed has	consented to serve as registered agent for this entity.		
8. Governors	1			
Name	Title	Address		
David Vainer	Member	2209 E 21ST ST		
		BROOKLYN, NY 11229-3637		
	1			
Signature of individual authorized by the entity to sign:				



David Vainer	10/31/2024
Sign Here	Date

Job Title: Member

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in \searrow my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this \Rightarrow certificate, the following entity information is reflected:

Entity Name:	ALLIANCE RISK INSURANCE SERVICES LLC
DOS ID Number:	7347274
Entity Type:	DOMESTIC LIMITED LIABILITY COMPANY
Entity Status:	EXISTING
Date of Initial Filing with DOS:	06/07/2024
Statement Status:	CURRENT
Statement Due Date:	06/30/2026

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



WITNESS my hand and official seal of the Department of State, at the City of Albany, on October 28, 2024 at 03:30 P.M.

WALTER T. MOSLEY Secretary of State

Brandon C. Hughes

BRENDAN C. HUGHES Executive Deputy Secretary of State

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