

FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typewritten)

For Office Use Only

-FILED-

File #: 0005608771

Date Filed: 2/16/2024 1:24:00 PM

1. The name of the entity is: Praxis Risk Services, Inc.
2. The name which it shall use in Idaho is: _____
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:
- | | |
|---|--|
| <input checked="" type="checkbox"/> Business Corporation | <input type="checkbox"/> General Partnership |
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> General Cooperative Association |
| <input type="checkbox"/> Limited Liability Partnership | <input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership) |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust |
| <input type="checkbox"/> Other: _____
(Use "Other" only if your foreign entity type is not listed above, and enter the type here.) | |

4. Jurisdiction of formation: Delaware
(Provide the domestic jurisdiction where the entity was formed)

5. The address of its principal office is:
5335 Triangle Parkway, Peachtree Corners, GA 30092
(Street Address)

(Mailing Address, if different)

6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

(Street Address)

(Mailing Address, if different)

7. The mailing address to which correspondence should be addressed, if different from item 5, is:

(Address)

8. Name and street address of registered agent in Idaho:
Corporation Service Company 1305 12th Avenue Road, Nampa, ID 83686

(Name and Address)

9. The name, capacity, and mailing address of at least one governor:

<u>Daniel Graybill</u>	<u>President/Dir.</u>	<u>333 E. Main Street, Muncie, IN 47305</u>
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(Name)	(Capacity)	(Address)
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<u>Tami E. Stevenson</u>	<u>Secretary/Dir.</u>	<u>5335 Triangle Parkway, Peachtree Corners, GA 30092</u>
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(Name)	(Capacity)	(Address)
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Secretary of State use only

Typed Name: Tami E. Stevenson

Signature: _____

Capacity: Secretary

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Praxis Risk Services, Inc.
Idaho – Foreign Registration Statement

#9 – Additional Officers & Directors

W. Bruce Swain Executive Vice President & Director
Office: 5335 Triangle Parkway, Peachtree Corners, Georgia 30092

Thomas J. Welch Treasurer
Office: 5335 Triangle Parkway, Peachtree Corners, Georgia 30092

Holly Boudreau Senior Vice President
Office: 5335 Triangle Parkway, Peachtree Corners, Georgia 30092

Matthew Taylor Vice President
Office: 5335 Triangle Parkway, Peachtree Corners, Georgia 30092

Christopher Felger Vice President
Office: 333 E. Main Street, Muncie, IN 47305

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Delaware

The First State

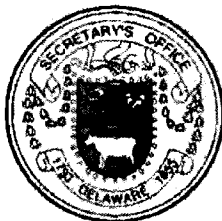
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PRAXIS RISK SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF FEBRUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRAXIS RISK SERVICES, INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF AUGUST, A.D. 2013.

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



5389404 8300

SR# 20240430453

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202776985

Date: 02-09-24

B0853-8632 02/16/2024 1:24 PM Received by Office of the Idaho Secretary of State