

State of Idaho

Office of the Secretary of State

**CERTIFICATE OF AUTHORITY
OF
LPS INSURANCE SERVICES, INC**

File Number C 201067

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: February 3, 2014



Ben Yursa
SECRETARY OF STATE

By

J. A. H.



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2014 FEB -3 AM 10: 22

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: LPS Insurance Services, Inc
2. The name which it shall use in Idaho is: LPS Insurance Services, Inc
3. It is incorporated under the laws of: Utah
4. Its date of incorporation is: Dec 31, 2013
5. The address of its principal office is:
157 W 7065 S Midvale, UT 84047
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: 700 W State Fl 3, Boise, ID 83702.
and its registered agent in Idaho at that address is: Bill Deal
8. The names and respective business addresses of its directors and officers are:

Name	Title	Business Address
<u>Nicholas Larsen</u>	<u>Secretary/ Vice Preside</u>	<u>157 W 7065 S Midvale, UT 84047</u>
<u>Richard Pupunu</u>	<u>President/ CEO</u>	<u>157 W 7065 S Midvale, UT 84047</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 1/31/2014

Signature: _____

Typed Name: Richard PupunuCapacity: President/ CEO

[The signer must be a director or an officer of the corporation.]

Customer Acct # : _____

(if using pre-paid account)

Secretary of State use only

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form\app\cert\authority_prof.cfm
Revised 08/2005

Web Form

IDAHO SECRETARY OF STATE
02/03/2014 05:00
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C201067



Utah Department of Commerce
Division of Corporations & Commercial Code
140 East 300 South, 2nd Floor, PO Box 146705
Salt Lake City, UT 84114-6705
Service Center: (801) 530-0809
Toll Free: (877) 526-3994 Utah Residents
Fax: (801) 530-6438
Web Site: <http://www.commerce.utah.gov>

01/03/2014
8813318-014201032014-677757

CERTIFICATE OF EXISTENCE

Registration Number: 8813318-0142
Business Name: LPS INSURANCE SERVICES, INC
Registered Date: December 31, 2013
Entity Type: Corporation - Domestic - Profit
Current Status: Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Kathy Berg

Kathy Berg
Director
Division of Corporations and Commercial Code