# State of Idaho

Office of the Secretary of State

#### **CERTIFICATE OF REGISTRATION**

OF

**BOYLE INSURANCE AGENCY, INC.** 

File Number C 210394

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, 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 Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: July 5, 2016

THE COLUMN

SECRETARY OF STATE

Ву

# 202

# FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2016 JUL -5 AM 9: 56
SECRETARY OF STATE

1.	The name of the entity is: Boyle Insurance Agency, Inc.			
2.	The name which it shall use in Idaho is:			
3.	Select the type of entity you wish to register:  (Enter a name here, only if you are required to adopt an alternate name)			
	☑ Business Corporation ☐ General Partnership			
	☐ Nonprofit Corporation	☐ General	Il Cooperative Association	
	☐ Limited Liability Partnership	☐ Limited	Partnership (Including a limited liability limited partnership	
	☐ Limited Liability Company ☐ Statutory Trust, Business Trust, or Common-law Business Trust			
	Other:  (Use "Other" only if your foreign entity type is not listed above, and enter the type here.)			
	hair disting of the marking. TN			
4.	(Provide the domestic jurisdiction where the entity was formed)			
5.	5. The address of its principal office is:			
	5900 Poplar Ave, Suite 100, Memphis, TN 38119			
	(Street Address)			
	P O Box 17800, Memphis, TN 38187 (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.				
1.	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:			aho:	
	Dean L. Cameron 700 W State FI 3, Boise, ID 83702  (Name) (Address)			
9.	9. The name, capacity, and mailing address of at least one governor:			
	• •	President	9856 Houston Levee Cv, Germantown, TN 38139	
	<del></del>	Capacity)	(Address)	
	Steven G. Peay	Sr VP	4178 Sequoia , Memphis, TN 38117	
		Capacity)	(Address)	
			idaho secretary of state	
Typed Name: Cynthia A. Gresham			07/06/2016 05:00 CK:15120 CT:326426 BH:1536249	
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Signature: WMWW U. / OWM AM 5				
C210394				
Typed Name: Cynthia A. Gresham  Signature: Cynthia A. Gresham  Capacity: President  Signature: Cynthia A. Gresham  Cynthia A. Gresham  Cynthia A. Gresham  CX: 15120 CT: 326426 BH: 1536249  16 100.00 = 100.00 FOR REG ST #2  CALO394				



## STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

**BOYLE INSURANCE AGENCY, INC.** 

June 29, 2016

**CAROL CLARK** SUITE 100 5900 POPLAR AVE MEMPHIS, TN 38119

Request Type: Certificate of Existence/Authorization

Issuance Date: 06/29/2016

Request #:

0206876

Copies Requested:

**Document Receipt** 

Receipt #: 002774315

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3677178397

\$20.00

Regarding:

**BOYLE INSURANCE AGENCY, INC.** 

Filing Type:

For-profit Corporation - Domestic

Control #:

470843

Date Formed:

06/02/2004

Formation/Qualification Date: 06/02/2004 Status:

Active

Formation Locale: TENNESSEE

**Duration Term:** 

Perpetual

Business County: SHELBY COUNTY

Inactive Date:

#### CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

### **BOYLE INSURANCE AGENCY, INC.**

- \* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above:
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett Secretary of State

Processed By: Cert Web User

Verification #: 017995331