

State of Idaho

Office of the Secretary of State

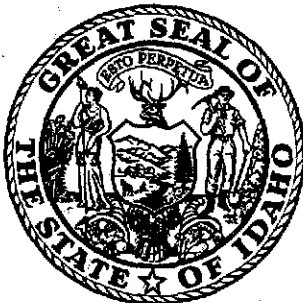
**CERTIFICATE OF REGISTRATION
OF
SOUTH SOUND INSURANCE SERVICES, INC.**

File Number C 207761

I, LAWRENCE 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: November 16, 2015



Lawrence Denney
SECRETARY OF STATE

By *Shirley Becker*



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00.

Complete and submit the form in duplicate.

2015 NOV 16 PM 2:49

SECRETARY OF STATE
STATE OF IDAHO

- The name of the entity is: South Sound Insurance Services, Inc.
- The name which it shall use in Idaho is: _____
(Enter a name here, only if you are required to adopt an alternate name)
- 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

☐ Other: _____
(Use "Other" only if your foreign entity type is not listed above, and enter the type here.)
- Jurisdiction of formation: Washington State
(Provide the domestic jurisdiction where the entity was formed)
- The address of its principal office is:

<u>1115 Black Lake Blvd SW Ste B</u>	<u>Olympia</u>	<u>WA</u>	<u>98502</u>
(Street Address)	(City)	(State)	(Zipcode)
(Mailing Address, if different)	(City)	(State)	(Zipcode)
- The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

(Street Address)	(City)	(State)	(Zipcode)
(Mailing Address, if different)	(City)	(State)	(Zipcode)
- The mailing address to which correspondence should be addressed, if different from item 5, is:

(Address)	(City)	(State)	(Zipcode)
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- Name and street address of registered agent in Idaho:

<u>Shannon Wickenden</u>	<u>6755 Sage Canyon Way</u>	<u>Star</u>	<u>ID</u>	<u>83669-0029</u>
(Name)	(Address)	(City)	(State)	(Zipcode)
- The name, capacity, and mailing address of at least one governor:

<u>Darlene Morales</u>	<u>President</u>	<u>1115 Black Lk Blvd SW Ste B</u>	<u>Olympia</u>	<u>WA</u>	<u>98502</u>
(Name)	(Capacity)	(Address)	(City)	(State)	(Zipcode)
(Name)	(Capacity)	(Address)	(City)	(State)	(Zipcode)

Typed Name: Darlene Morales

Signature: _____

Capacity: Owner/Agent /President

Secretary of State use only

IDAHO SECRETARY OF STATE

11/16/2015 05:00

CK:1502 CT:316854 BH:1500596

1@ 100.00 = 100.00 FOR REG ST #2

1@ 20.00 = 20.00 EXPEDITE C #3

C207761

UNITED STATES OF AMERICA

The State of Washington

Secretary of State

I, **KIM WYMAN**, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

SOUTH SOUND INSURANCE SERVICES, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 4/3/2007.

I FURTHER CERTIFY that as of the date of this certificate, SOUTH SOUND INSURANCE SERVICES, INC. remains active and has complied with the filing requirements of this office.

Date: November 9, 2015

UBI: 602-712-395



Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Kim Wyman

Kim Wyman, Secretary of State