## State of Idaho

Office of the Secretary of State

#### **CERTIFICATE OF REGISTRATION**

OF

#### ALIGHT ADMINISTRATION SOLUTIONS LLC

File Number W 207280

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: August 28, 2018



SECRETARY OF STATE

By \_ Weed

# 202

### FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

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

Complete and submit the form in <u>duplicate</u>.

2018 AUG 28 PM 3: 00

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the entity is: Alight Administration Solutions LLC					
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.	3. Select the type of entity you wish to register:					
	■ Business Corporation	Business Corporation				
	☐ Nonprofit Corporation ☐ General Cooperative Association					
☐ Limited Liability Partnership ☐ Limited Partnership (Including a limited						
	☑ Limited Liability Company ☐ Statutory Trust, Business Trust, or Common-law Business Trust					
	Other: (Use Other only if your foreign entity type is <u>not</u> listed shove, and enter the type here.)					
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4.	Jurisdiction of formation: Delaware  (Provide the domestic jurisdiction where the entity was formed)					
5.	The address of its principal office is: 4 Overlook Point, Lincolnshire, IL 60069					
	(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:					
-						
	(Stiget Address)					
	(Mailing Address, (different)					
_	The mailing address to which correspondence should be addressed, if different from item 5, is:					
7.	THE HIBINING SIGNESS TO WHICH CORRESPONDENCE SHOULD be addressed, in different north form of the					
	(Address)					
8.	The name of the registered agent and street address of registered agent in Idaho:					
*	Corporation Service Company, 12550 W. Explorer Drive, Suite 100, Boise, ID 83713					
	(Address)					
9.	The name canacity and mailing	he name, capacity, and mailing address of at least one governor:				
٥.	Chris Michalak	Manager			incolnshire, IL 60069	
	(Name)	(Capacity)	(Address)	O.S.12,		
	A1 2 77 11 11 4					
	(Name)	(Capacity)	(Andress)			
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	Signature:	, w		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	CK: PREPAID CT:1157 BH:1661221	
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Typed Name: CHRIS MICHALAK			Secretary of State use only	10 20.00 = 20.00 EXPEDITE C #3		
	,			7etar	10/207300	
Capacity: Manager			Sec	13 N207280		

Rev. 11/2015

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ALIGHT ADMINISTRATION SOLUTIONS LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF AUGUST, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALIGHT ADMINISTRATION SOLUTIONS LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF JUNE, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

at corn delaware gov/auth

6944848 8300 SR# 20186297139 Authentication: 203291071

Date: 08-22-18