



0003449813

**STATE OF IDAHO**

Office of the secretary of state, Lawrence Denney

**AMENDMENT OF FOREIGN REGISTRATION STATEMENT**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$30.00 - Make Checks Payable to Secretary of State

For Office Use Only

**-FILED-**

File #: 0003449813

Date Filed: 3/12/2019 12:55:09 PM

1. The name of the entity as currently registered with the Idaho Secretary of State is:  
**SELECTHEALTH BENEFIT ASSURANCE COMPANY, INC.**  
The file number of this entity on the records of the Idaho Secretary of State is: 0000607978

2. The entity name in it's home jurisdiction is/or is amended to:  
Upload or mail a Certificate of Existence/Good Standing from your domestic state (home jurisdiction) when filing this document.

3. The new name to be used in Idaho is:  
Change Name? I do not want to change the name used in Idaho

4. The entity type is:  
Foreign Business Corporation

5. The entity's jurisdiction is amended to:  
UTAH

6. The street address of the principal office is amended to:  
Principal Office Address 5381 GREEN ST  
MURRAY, UT 84123

7. The mailing address of the principal office is amended to:  
Mailing Address 5381 S GREEN ST  
MURRAY, UT 84123-4661

8. The name, capacity and mailing address of the governor(s) is amended to:

Name	Title	Address
Patricia R. Richards	President	5381 GREEN STREET MURRAY, UT 84123
Patricia R. Richards	Director	5381 GREEN STREET MURRAY, UT 84123
Gregory M. Johnson	Treasurer	5381 GREEN STREET MURRAY, UT 84123
Kristin McCullagh	Secretary	5381 GREEN STREET MURRAY, UT 84123

The amendment must be signed by an officer or director of a corporation, a member or manager of an LLC, or a partner of an LP.

Kristin McCullagh

Sign Here

03/12/2019

Date

Signer's Title: Secretary

B0199-8713 03/12/2019 12:55 PM Received by ID Secretary of State Lawrence Denney



State of Utah

GARY R. HERBERT  
Governor

SPENCER J. COX  
Lieutenant Governor

# Insurance Department

TODD E. KISER  
Insurance Commissioner

## CERTIFICATE OF COMPLIANCE

I, **TODD E. KISER**, Insurance Commissioner of the State of Utah, do hereby certify that the

### **SELECTHEALTH BENEFIT ASSURANCE COMPANY INC.**

**NAIC #63245**

a corporation incorporated under the laws of the State of Utah is authorized to transact an insurance business in the State of Utah in accordance with the laws thereof, as follows (Utah Insurance Code sections in brackets):

ACCIDENT AND HEALTH-LIFE [31A-1-301(1)(a)]

This certificate is continuous and shall not be issued annually. This certificate shall be extended each March first upon application for renewal by the company and upon payment of the statutory fees and taxes and shall remain in full force and effect unless refused, suspended or revoked by the Commissioner.

IN TESTOMONY WHEREOF, I hereto subscribe my name and affix the Official Seal of my office at Salt Lake City, Utah this date **February 4, 2019**.

Todd E. Kiser  
Insurance Commissioner

By: \_\_\_\_\_

*Joe R. Coccimiglio*  
Joe R. Coccimiglio  
Insurance Financial Regulator  
Utah Insurance Department

