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**-FILED-**

File #: 0005949085

Date Filed: 10/21/2024 1:34:00 PM

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed)

1. The name of the entity is: AssuredPartners, Inc.
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. 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           |
| <input type="checkbox"/> Other:                          |                                                                                                  |

(Use "Other" only if your foreign entity type is not listed above, and enter the type here.)

4. Jurisdiction of formation: Delaware  
(Provide the domestic jurisdiction where the entity was formed)

5. The address of its principal office is:  
450 S Orange Ave., 4th Floor, Orlando, FL 32801  
(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:  
1209 Orange Street, Wilmington, Delaware 19801  
(Street Address)

(Mailing Address, if different)

7. 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:  
C T Corporation System - 1555 W. Shoreline Drive, Suite 100, Boise, ID 83702  
(Name and Address)

9. The name, capacity, and mailing address of at least one governor:

See attached

(Name)	(Capacity)	(Address)
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(Name)	(Capacity)	(Address)
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Secretary of State use only

Typed Name: Randy Larsen

Signature:

— Signed by,

Randy Larsen

Capacity: Chief Executive Officer

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# AssuredPartners, Inc.

## Management Structure

Address: 450 S Orange Ave., 4th Floor, Orlando, FL 32801

Management Name	Title Role	Title
Anderson, Eric	Officer	Executive Vice President
Bair, R. Brian	Officer	President, Retail - Eastern Regions
Beba, Kutay (Ty)	Officer	Executive Vice President & Chief Revenue Officer
Ghosh, Sankha	Officer	Executive Vice President & Chief Information Officer
Hammond, Mark	Officer	Executive Vice President & Chief Financial Officer
Henderson, Jim W.	Director	Director
Henderson, Jim W.	Officer	Executive Chairman
Kinnett, II Stanley K.	Officer	Executive Vice President, Chief Legal Officer & Secretary
Kozera, Thomas R.	Officer	Executive Vice President & Corporate Risk Officer
Larsen, Randy	Director	Director
Larsen, Randy	Officer	Chief Executive Officer
Lopez, Daniel	Officer	Treasurer
Muscatello, Steven D.	Officer	Senior Vice President, General Counsel, & Assistant Secretary
Smith, Sean K.	Director	Director
Smith, Sean K.	Officer	President, Accretive
Stocksdale, Todd	Officer	President, Retail - Western Regions
Whisenant, Lesli	Officer	Senior Vice President

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# Delaware

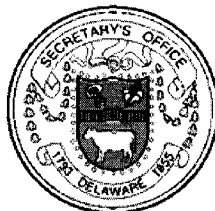
The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ASSUREDPARTNERS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



4944884 8300

SR# 20243992235

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 204672530

Date: 10-19-24

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