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COVER LETTER

	stration Section ion of Corporations			
SUBJECT:	Relation Insurance Services	Select, Inc.		
			ist include suffix	
Dear Sir or M	ladam:			
"Certificate o	"Application by Foreign Corpora f Existence," or "Certificate of Goced foreign corporation to transac	ood Standing	" and check are subm	
Please return	all correspondence concerning thi	s matter to th	ne following:	
Darrell Belc	h			
	N	lame of Perso	on	
3H Corporat	te Services, LLC			
	Fi	rm/Company	,	
36 Long Alle	ey. Second Floor			
	-	Address		
Saratoga Spr	ings, NY 12866			
	City	/State and Z	ip code	
relationsos@	•			
	E-mail address: (to b	e used for fu	ture annual report no	tification)
For further in	formation concerning this matter,	please call:		
Darrell Belc	h at (-	518)	583-0639 Ext. 125	
Nam		rea Code	Daytime Telepho	one Number
Regis Divis The C 2415	EET/COURIER ADDRESS: stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
	check for the following amount: neck payable to: FLORIDA DEPAR ing Fee	& □ \$78	STATE 3.75 Filing Fee & rtified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

"Inc.," "Co.," "Corp," "Inc." "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida. (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (2326 South Church Street, Suite C, Burlington, NC 27215 (Principal office street address) 9225 Indian Creek Parkway, Suite 700, Overland Park, KS 66210 (Current mailing address, if different) Name: 3H Agent Services, Inc. Diffice Address: 1415 Panther Lane, Suite 327 Naples Florida 34109 (City) (Zip code)	·	nce Services Select, Inc. orporation; must include "INCORPORATED,"	"COMPANY," "CORPORATION,"
North Carolina 3 56-2121749 (State or country under the law of which it is incorporated) (FEI number, if applicable) 1/26/1999 5 (Date of incorporation) (Date of duration, if other than perpetual)			
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Naples Florida 34109	Name:	3H Agent Services, Inc.	
riondu	ffice Address:	1415 Panther Lane, Suite 327	
(City) (Zip code)		Naples	Florida 34109
		(City)	(Zip code)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS					
□Chairman	Name: Joseph L. Tatum, Jr.	□Chairman	Name: Edward Nathan Page		
□Vice Chairman	Address: 1277 Treat Blvd., Suite 400	□Vice Chairman	Address: 1277 Treat Blvd., Suite 400		
⊠ Director	Walnut Creek, CA 94597	Director	Walnut Creek, CA 94597		
□President	<u>. </u>	⊠President			
Executive Vice President		□Vice President			
Assistant WiSecretary	∆ Treasurer	⊠ Secretary	□Treasurer		
☑Other CEO	□Other	⊠Other <u>COO</u>	□Other		
□Chairman	Name: Christopher W. McKechnie	□Chairman	Name: Keri A. Vami		
□Vice Chairman	Address: 1277 Treat Blvd., Suite 400	□Vice Chairman	Address: 1277 Treat Blvd., Suite 400		
Director	Walnut Creek, CA 94597	□Director	Walnut Creek, CA 94597		
□President		□President			
□Vice President		⊠Vice President			
□Secretary	□Treasurer	□Secretary	☐ Tieasurei		
∑ Other <u>CFO</u>	Other	□Other	Other		
□Chairman	Name: Stephen D. Martin	□Chairman	Name:		
□Vice Chairman	Address: 2800 West March Lane, Suite 420	□Vice Chairman	Address:		
Director	Stockton, CA 95219	□Director			
□President		□President			
☑Vice President		□Vice President			
Secretary	Treasure	□Secretary	□Treasurer		
□Other	□Other	□Other	Dther		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. Signature of Director or Officer					
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.					
13. Joseph L. Tatum, Jr., Chief Executive Officer					
(Typed or printed name and capacity of person signing application)					



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

RELATION INSURANCE SERVICES SELECT, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 26th day of January, 1999, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 8th day of January, 2021.

Claire & Marshall

Secretary of State

Certification# 108699133-1 Reference# 16714507- Page: Fof 1 Verify this certificate online at https://www.sosne.gov/verification