Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

# **Certificate of Authority**

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

- 1. The business entity is a limited liability company.
- 2. The name of the entity is: T&H BENEFITS LLC
- 3. The name of the entity to be used in Kentucky is (if applicable):
- 4. It is an entity organized and existing under the laws of the state of New York.

5. The date of organization is See Original Certificate of Authority. and the period of duration is 12/31/2026

### **Principal Office**

320 WEST 57TH ST **5TH FLOOR NEW YORK, NY 10019** 

## **Registered Agent Name/Address**

**Corporation Service Company** 421 West Main Street Frankfort, KY 40601

### Members/Managers

Member	Alliant Insurance Services, Inc. 701 B STREET, 6TH FLOOR
Manager	THOMAS W CORBETT (MANAGER) 1301 DOVE ST STE 200, NEWPORT
-	BEACH, CA 92660
Manager	RALPH S HURST (MANAGER) 1301 DOVE ST STE 200, NEWPORT BEACH,
-	CA 92660
Manager	P GREGORY ZIMMER JR (MANAGER) 1301 DOVE ST STE 200, NEWPORT
-	BEACH, CA 92660

6. Ted Filley, EVP / Treasurer, on 11/2/2023

7. I. Corporation Service Company, consent to serve as the registered agent on behalf of the this entity on 11/2/2023

0498320 0498320 Michael G. /.....

Received and Filed 11/2/2023 12:00:00 AM Fee receipt: \$148.00

## RCA