

STATE OF DELAWARE  
CERTIFICATE OF FORMATION  
OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is  
CARRIAGE HILL INSURANCE OF KNOXVILLE LLC

2. The Registered Office of the limited liability company in the State of Delaware is located at 1209 ORANGE STREET CORPORATION TRUST CENTER (street), in the City of WILMINGTON, Zip Code 19801. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is THE CORPORATION TRUST COMPANY

By:   
Authorized Person

Name: George R Arrants, Attorney

Print or Type: