

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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Michael G. Adams
Secretary of State
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Frankfort, KY 40602-0718
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Certificate of Authority

RCA

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: HEALTHINSURANCE.COM, 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 Delaware.
5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

Principal Office

3030 SOUTH BUNDY DRIVE
LOS ANGELES, CA 90066

Registered Agent Name/Address

Registered Agent Solutions Inc
828 Lane Allen Rd
Suite 219
Frankfort, KY 40504

Members/Managers

Member	Domenick DiCicco	3450 Buschwood Park Drive
Member	Kevin Todd Baxter	3450 Buschwood Park Drive
Member	Michael DeVries	3450 Buschwood Park Drive

6. As the Authorized Representative, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Allison Kellogg on 6/2/2023

7. As the Registered Agent, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Registered Agent Solutions Inc on 6/2/2023