

For Office Use Only

**-FILED-**File No.: 6493043  
Date Filed: 1/1/2025**Secretary of State  
Statement and Designation by  
Foreign Corporation****S&DC-S/N**Must be submitted with a current **Certificate of Good Standing** issued by the government agency where the corporation was formed.**Filing Fee** - \$100.00 (for a foreign stock corporation) or  
\$30.00 (for a foreign nonprofit corporation)**Certified Copy Fee (Optional)** - \$5.00Note: Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <https://www.ftb.ca.gov/>.**This Space For Office Use Only****1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-reservations](http://www.sos.ca.gov/business/be/name-reservations) for general corporate name requirements and restrictions.)**2. Jurisdiction** (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

Insurancebeacon.com, Inc

Arizona

**3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
15270 W Brookside Ln Ste 125	Surprise	AZ	85374
b. Street Address of Principal Office In California, If any - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
1000 N Farrell Dr Ste 102	Palm Springs	CA	92262
c. Mailing Address of Principal Executive Office, If different than Item 3a	City (no abbreviations)	State	Zip Code

**4. Service of Process** (Must provide either Individual OR Corporation.)

INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
Christian		Graciano	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
1000 N Farrell Dr Ste 102	Palm Springs	CA	92262

CORPORATION - Complete Item 4c. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 4a or 4b
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**5. Read and Sign Below** (Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

  
Signature  
Type or Print Name

# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

### CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

**INSURANCEBEACON.COM, INC.**

ACC file number: 09808766

was incorporated under the laws of the State of Arizona on 10/19/2000;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.

IN WITNESS WHEREOF, I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: 12/04/2024



A handwritten signature in cursive script, reading "Douglas R. Clark".

**Douglas R. Clark, Executive Director**

**Attachment page**

**Insurancebeacon.com, Inc**

**Requested file date of January 1, 2025**