Filing Fee: \$150.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned

	reign limited liability company hereby applies for a Cer land, and for that purpose submits the following statemo		ct dusiness in the state of Rhode		
1.	The name of the limited liability company is: ET Life 1099 Reporting Company, LLC				
	This company has been duly organized in its state of forma	ation as a low-profit limited liability compa	any. (Check box if applicable)		
2.	The name, if different, under which it proposes to reg	ister and transact business in R	hode Island is:		
3.	The limited liability company is organized under the laws of <u>Delaware</u>				
4.	The date of its organization is <u>June 27, 2014</u>				
5.	The period of duration of the limited liability company is (if perpetual, so state)				
6.	The address of the limited liability company's resident agent in Rhode Island is:				
	222 Jefferson Boulevard, Suite 200	Warwick	. RI 02888		
	(Street Address, <u>not</u> P.O. Box)	(City/Town)	(Zip Code)		
	and the name of the resident agent at such address is	S Corporation Service Company			
		(Name of	Agent)		
7.	The secretary of state is appointed the agent of the foreign limited liability company for service of process if at an time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.				
8.	The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:				
	2711 Centerville Road, Suite 400, Wilmington, DE 19808				
9.	The mailing address for the limited liability company is	s:			
	401 Pennsylvania Parkway, Suite 300				
	Indianapolis, IN 46280				
	FILED 12:09 pm	1			
	m No. 450 vised: 07/12 NOV 25 2014	,			
101	227211				

10.	Management of the Limited Liability Company (check <u>one</u> only):			
	A.	The limited liability company is to be No. 11 DO NOT LIST ANY NAME	be managed by its members. (If you have checked this box, go to item	
	<u>or</u>			
	B. The limited liability company is to be managed by one (1) or more managers. (If the limited liab company has managers at the time of the filing of these Articles of Organization, state the name address of each manager.)			
		<u>Manager</u>	<u>Address</u>	

11.	This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.			
12.	The	e date this Application for Registrati	on is to become effective, if later than the date of filing, is:	
		(not prior to, nor more the	an 30 days after, the filing of this Application for Registration)	
			Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.	
Date	e: <u>1</u>	November 2/ , 2014	ET Life 1099 Reporting Company, LLC Print Exact Name of Limited Liability Company Making Application	
			By	
			Stephen M. Coons Signature of Authorized Person	

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ET LIFE 1099 REPORTING COMPANY, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF NOVEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ET LIFE 1099 REPORTING COMPANY, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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AUTHENT TCATION: 1890132

DATE: 11-21-14

You may verify this certificate online at corp.delaware.gov/authver.shtml



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

