

# State of Rhode Island Office of the Secretary of State

Fee: \$310.0

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

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# **Application for Certificate of Authority**

(Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended)

#### **SECTION I**

The name of the corporation is <u>Ideal Producers Group, Inc.</u>

**SECTION II** 

It is incorporated under the laws of State: KS Country: USA

This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing

### **SECTION III**

The name, if different, which it elects to use in Rhode Island:

- (a) If the name of the corporation does not contain the word "corporation", "company", "incorporated", or "limited", or an abbreviation thereof, add one of these corporate endings for use in Rhode Island **OR**
- (b) if the corporation proposes to qualify and transact business under a different name, list that name:

Note: If option (b) is elected, a Fictitious Business Name Statement (FORM 624A) is required to be filed with this application

#### **SECTION IV**

The date of its incorporation is 10/28/2008

and the period of its duration is X Perpetual

**SECTION V** 

The location of its principal office is

No. and Street: 6710 W 121ST STREET

SUITE 200

City or Town: OVERLAND PARK State: KS Zip: 66209 Country: USA

### **SECTION VI**

The address of its proposed registered office in Rhode Island is

No. and Street: 222 JEFFERSON

SUITE 200

City or Town:  $\underline{WAWICK}$  State: RI Zip:  $\underline{02888}$ 

and the name of its proposed registered agent in Rhode Island at that address is  $\underline{CORPORATION}$   $\underline{SERVICE}$   $\underline{COMPANY}$ 

# **SECTION VII**

The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

## **INSURANCE AGENCY**

# SECTION VIII

(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).

Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	

PRESIDENT		KAREN ESSARY		6710 W. 121ST STREET, #200 OVERLAND PARK, KS 66209 USA	
(b) The names and respective ad-	dresses of its princ	cipal officers (mandator	y if directors are not required under the l	aws of the state or	
country of which it is incorporated	d).		•		
Title		Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT		KAREN ESSARY		6710 W. 121ST STREET, #200 OVERLAND PARK, KS 66209 USA	
The aggregate number of shares series, if any, within a class, is:	which it has autho	SECTION IX	y classes, par value of shares, shares w	ithout par value, and	
Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares  Num of Shares		
CWP			\$1.0000	1,000.00	
		-		·	
signing this instrument constitute	es the affirmation t and deed or the	or acknowledgement o act and deed of the cor	This electronic signature of the indiving the signatory, under penalties of perjustroporation, and that the facts stated here	ıry, that this	
By KARENESSARY					

Signature of Authorized Officer of the Corporation

Form No. 150 Revised 09/07

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# STATE OF KANSAS OFFICE OF SECRETARY OF STATE

# CERTIFICATE OF GOOD STANDING

I, SCOTT SCHWAB, Kansas Secretary of State, certify that the records of this office reveal the following:

**Business ID: 4253233** 

Business Name: IDEAL PRODUCERS GROUP, INC.

Type: Domestic For-Profit Corporation

Jurisdiction: Kansas

was filed in this office on October 28, 2008, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof: I affix my official certification seal. Done at the City of Topeka, on this day August 27, 2025.

SCOTT SCHWAB KANSAS SECRETARY OF STATE

Certification Number: 602296-20250827 To verify the validity of this certificate please visit https://www.sos.ks.gov/eforms/BusinessEntity/CertifiedValidationSearch.aspx and enter certificate number.