

1.) CORPORATION NAME:

Molina Healthcare Insurance Company

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

DUE DATE: **1/31/2012**

SCC ID NO: **F1062126**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 4,000,000 |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 200 OCEANGATE
SUITE 100

CITY/ST/ZIP: LONG BEACH, CA 90802-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JOHN C. MOLINA
TITLE: PRESIDENT
ADDRESS: 200 OCEANGATE
SUITE 100
CITY/ST/ZIP/CO: LONG BEACH, CA 90802-

OFFICER DIRECTOR

NAME: JEFF D. BARLOW
TITLE: SECRETARY
ADDRESS: 300 UNIVERSITY AVENUE
SUITE 100
CITY/ST/ZIP/CO: SACRAMENTO, CA 95825-

OFFICER DIRECTOR

NAME: JOSEPH WHITE
TITLE: CFO
ADDRESS: 200 OCEANGATE
STE 100
CITY/ST/ZIP/CO: LONG BEACH, CA 90802-4202

OFFICER DIRECTOR

NAME: ROBERT GORDON
TITLE: DIRECTOR
ADDRESS: 200 OCEANGATE
STE 100
CITY/ST/ZIP/CO: LONG BEACH, CA 90802-

OFFICER DIRECTOR

| | | |
|---|----------------------------------|--|
| NAME: JOSEPH M. MOLINA, MD TITLE: DIRECTOR ADDRESS: 200 OCEANGATE SUITE 100 CITY/ST/ZIP/CO: LONG BEACH, CA 95825- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
|---|----------------------------------|--|

| | | |
|---|----------------------------------|--|
| NAME: JOHN M. PUENTE TITLE: DIRECTOR ADDRESS: 300 UNIVERSITY AVENUE SUITE 100 CITY/ST/ZIP/CO: SACRAMENTO, CA 95825- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
|---|----------------------------------|--|

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

| | | |
|---|----------------------------------|-------------------|
| <u>/s/ JEFF D. BARLOW</u> | <u>JEFF D. BARLOW, SECRETARY</u> | <u>11/10/2011</u> |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.