

# State of Idaho

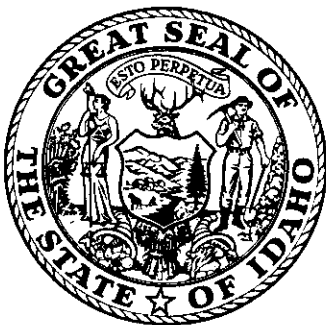
Office of the Secretary of State

**AMENDED CERTIFICATE OF AUTHORITY  
OF  
AMERICAN EXPRESS PROPERTY CASUALTY INSURANCE AGENCY, INC.  
File Number C 145606**

I, BEN YSURSA, Secretary of the State, hereby certify that an Application for Amended Certificate of Authority, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Amended Certificate of Authority to reflect the name change from **AMERICAN EXPRESS PROPERTY CASUALTY INSURANCE AGENCY, INC.** to **AMERIPRISE AUTO & HOME INSURANCE AGENCY, INC.** and attach hereto a duplicate of the application for such amended certificate.

Dated: September 22, 2005



*Ben Yursa*  
SECRETARY OF STATE

By *Kristin Alcott*



# APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

(Instructions on back of application)

05 SEP 22 AM 11:56

SECRETARY OF STATE  
STATE OF IDAHO

To the Secretary of State of the State of Idaho:

Pursuant to Section 30-1-1504, **Idaho Code**, the undersigned Corporation hereby applies for an amended certificate of authority to transact business in the State of Idaho and for that purpose submits the following statement. Complete only applicable items.

1. A Certificate of Authority was issued to the corporation by your office on: 09/26/2002,  
authorizing it to transact business in the State of Idaho under the name of:  
American Express Property Casualty Insurance Agency, Inc
2. Its corporate name has been changed to: Ameriprise Auto & Home Insurance Agency, Inc.
3. The name which it shall use hereafter in the State of Idaho is:  
Ameriprise Auto & Home Insurance Agency, Inc.
4. It has changed its jurisdiction of incorporation, without a change of corporate identity to: \_\_\_\_\_

Dated: 9-14-05 Corporation Name: Ameriprise Auto & Home Insurance Agency, Inc.

Signature: Debra A Combs

Typed Name: Debra A. Combs

Capacity: Asst. Secretary

Customer Acct # :

(if using pre-paid account)

Secretary of State use only

g:\corp\forms\corpform\amended cert of authority.pdf  
Revised 07/2002

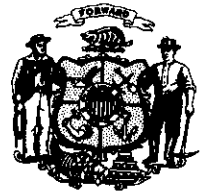
IDAHO SECRETARY OF STATE  
09/22/2005 05:00  
CK: 710157250 CT: 21069 BH: 913063  
1 @ 30.00 = 30.00 AMEND CERT # 3  
1 @ 20.00 = 20.00 EXPEDITE C # 4

C145606

DOM  
180 181 185

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Present Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions do hereby certify that

AMERIPRISE AUTO & HOME INSURANCE AGENCY, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is APRIL 12, 2002.

I further certify that said corporation filed an Amendment on August 3, 2005 (effective date August 2, 2005) changing the corporate name from AMERICAN EXPRESS PROPERTY CASUALTY INSURANCE AGENCY, INC. to the present name of AMERIPRISE AUTO & HOME INSURANCE AGENCY, INC.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622, or 181.0120, Wis. Stats., and that it has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed the official seal  
of the Department on September 20, 2005.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Deputy Administrator  
Division of Corporate & Consumer Services  
Department of Financial Institutions

BY: *Patricia Weber*



Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.