

No. W 88244		Due no later than Nov 30, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. U.S. BANCORP INSURANCE SERVICES, LLC NATASHA KNACK BC-MN-H210 800 NICOLLET MALL MINNEAPOLIS MN 55402		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	WILLIAM J BENJAMIN	800 NICOLLET MALL	MINNEAPOLIS	MN	USA	55402	
MANAGER	ANGELA O'LEARY	800 NICOLLET MALL	MINNEAPOLIS	MN	USA	55402	
MANAGER	DANIEL J MCCORMACK	800 NICOLLET MALL	MINNEAPOLIS	MN	USA	55402	
MANAGER	JOHN G FALK	800 NICOLLET MALL	MINNEAPOLIS	MN	USA	55402	
MANAGER	TRUDI M BUCKLEY	7TH AND WASHINGTON STREETS	ST. LOUIS	MO	USA	63101	
5. Organized Under the Laws of: WI W 88244		6. Annual Report must be signed.* Signature: Gail Van Horn Name (type or print): Gail Van Horn Date: 11/17/2016 Title: Secretary					
Processed 11/17/2016		* Electronically provided signatures are accepted as original signatures.					