

No. W 116490	Due no later than Aug 31, 2018 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. TRUSTAGE INSURANCE AGENCY, LLC 2000 HERITAGE WAY WAVERLY IA 50677 USA		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
MEMBER	CMFG LIFE INSURANCE COMPANY	5910 MINERAL POINT ROAD	MADISON	WI	USA	53705
5. Organized Under the Laws of: IA W 116490	6. Annual Report must be signed.* Signature: Kelly Lettmann Name (type or print): Kelly Lettmann		Date: 07/10/2018 Title: POA			
Processed 07/10/2018		* Electronically provided signatures are accepted as original signatures.				