





#### STATE OF IDAHO

Office of the secretary of state, Lawerence Dennev FOREIGN REGISTRATION STATEMENT (LIMITED LIABILITY COMPANY)

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

For Office Use Only

-FILED-

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Foreign Registrat	ion Statemer	nt (Limited Liability	y Company)
Salaat ana:	Standard	Expedited or	Sama Day

Select one: Standard, Expedited or Same Day Service (see Standard (filing fee \$100)

descriptions below)

1. The name this limited liability company will use in Idaho is:

Type of Limited Liability Company

Entity name

Delta Insurance Solutions, LLC

2. Home Jursidiction

The jurisdiction of formation is:

WISCONSIN

3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Street Address

**CORRIE FEAVEL** 1000 FREEDOM WAY WEST BEND, WI 53095

Foreign Limited Liability Company Delta Insurance Solutions, LLC

4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Mailing Address

**CORRIE FEAVEL** 1000 FREEDOM WAY WEST BEND, WI 53095

5. The complete street address of the principal office is:

Principal Office Address

**CORRIE FEAVEL** 1000 FREEDOM WAY WEST BEND, WI 53095

6. The mailing address of the principal office is:

Mailing Address

**CORRIE FEAVEL** 1000 FREEDOM WAY WEST BEND, WI 53095-4945

7. Registered Agent Name and Address

Registered Agent

CT CORPORATION SYSTEM Commercial Registered Agent

**Physical Address** 

921 S ORCHARD ST

STE G

**BOISE, ID 83705** Mailing Address

921 S ORCHARD ST

STE G

**BOISE, ID 83705** 

☑ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

### 8. Governors

Name	Title	Address
Timothy Schmidt	Member	CORRIE FEAVEL 1000 FREEDOM WAY WEST BEND, WI 53095-4945



Signature of individual authorized by the entity to sign:

03/2022
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Sign Here Date

Job Title: Compliance Director

# United States of America State of Wisconsin

#### DEPARTMENT OF FINANCIAL INSTITUTIONS



Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, Michelle Y. Knuese, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

### **DELTA INSURANCE SOLUTIONS, LLC**

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 December 22, 2021.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.0214 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on April 25, 2022.

MICHELLE Y. KNUESE, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

DFI/Corp/33

# To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

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