Florida Department of State

Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6384

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

CORPORATION REINSTATEMENT

SECURIAN CASUALTY COMPANY

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P06000006777

1. Corporation Name

Securian Casualty Company

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
400 Robert Street North		400 Robert Street North	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Saint Paul, MN		Saint Paul, MN	
Zip	Country	Zip	Country
55101	USA	55101	USA

CR2E061 (12/08)

4. Date Incorporated or Qualified To Do Business in Florida: 10/27/2006

5. FEI Number: 411741988 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $30.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road

Suite, Apt. #, Etc.:

City: Plantation | State: FL | Zip Code: 33324

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Alfred Morales — Date: 11/6/09

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	See attached list		
	REINSTATEMENT RH		

10. I certify that I am an officer or director of the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Dwayne C. Radel — Dwayne C. Radel — 11/6/09 — 651-665-3500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Name	Title	Address
Christopher R. Greene	President and Chief Executive Officer	2960 Riverside Drive, PO Box 6097 Macon, GA 31208-6097
Dwayne C. Radel	Secretary	400 Robert Street North, St. Paul, MN 55101-2098
Betty N. Brost	Vice President	400 Robert Street North, St. Paul, MN 55101-2098
David J. LePlavy	Treasurer	400 Robert Street North, St. Paul, MN 55101-2098

Assistant Secretaries	Address-same for all
Dwayne C. Radel	400 Robert Street North, St. Paul, MN 55101-2098
Jacquelyn M. Philpot	
Dean Czarnetzki	
Bernice Arias-Sather	
Daniel J. Wells	
Debra JB Staiger	
Deborah J. Quarnstrom	
Maren A. Kunkel	
Angela M. Kusilek (Carlberg)	
Matthew A. Harrington	
Joy E. Norquist	
Paula J. Moris	
Adam M. Swartz	
Mary S. Hulsiek	
Sheila Buske	

Name	Address
Robert L. Senkler (Chair)	400 Robert Street North, St. Paul, MN 55101-2098
Warren J. Zaccaro	400 Robert Street North, St. Paul, MN 55101-2098
Betty N. Brost	400 Robert Street North, St. Paul, MN 55101-2098
Christopher R. Greene	2960 Riverside Drive, PO Box 6097, Macon, GA 31208-6097
Dwayne C. Radel	400 Robert Street North, St. Paul, MN 55101-2098
James Keath Daniels	2960 Riverside Drive, PO Box 6097, Macon, GA 31208-6097
Christopher M. Hilger	400 Robert Street North, St. Paul, MN 55101-2098

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