2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005520

Entity Name: EMPOWER RETIREMENT, LLC

Current Principal Place of Business:

8515 E ORCHARD RD

GREENWOOD VILLAGE, CO 80111

Current Mailing Address:

8515 E ORCHARD RD

GREENWOOD VILLAGE, CO 80111 US

FEI Number: 84-1233483 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED May 27, 2020

Secretary of State

4302494659CC

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

NameSODERQUIST, DARLENENameMORITZ, CHRISTINE M.Address8515 E ORCHARD RDAddress8515 E ORCHARD RD

City-State-Zip: GREENWOOD VILLAGE CO 80111 City-State-Zip: GREENWOOD VILLAGE CO 80111

Title MANAGER Title MANAGER

Name MCDONALD, GRAHAM R. Name LINTON, RICHARD H. JR.

Address 8515 E ORCHARD RD Address 8515 E ORCHARD RD

City-State-Zip: GREENWOOD VILLAGE CO 80111 City-State-Zip: GREENWOOD VILLAGE CO 80111

Title MANAGER Title MANAGER

Name KNIGHT, JEFFREY W. Name GEARIN, JAMES M.

Address 8515 E ORCHARD RD Address 8515 E ORCHARD RD

City-State-Zip: GREENWOOD VILLAGE CO 80111 City-State-Zip: GREENWOOD VILLAGE CO 80111

Title MANAGER

Name BEGLEY, JOHN F.

Address 8515 E ORCHARD RD

City-State-Zip: GREENWOOD VILLAGE CO 80111

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN F. BEGLEY MANAGER 05/27/2020