

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000001549

Entity Name: SUPPLEMENTAL INSURANCE MARKETING, L.L.C.

Current Principal Place of Business:

137 MAIN STREET, SUITE 400
DUBUQUE, IA 52001

Current Mailing Address:

137 MAIN STREET, SUITE 400
DUBUQUE, IA 52001

FEI Number: 27-1337531

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WIGGINS, CHARLES T
BEGGS AND LANE, RLLP
501 COMMENDENCIA ST.
PENSACOLA, FL 32502 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

Authorized Person(s) Detail :

Title	MGRM
Name	PLATINUM SUPPLEMENTAL INSURANCE, INC.
Address	137 MAIN STREET, SUITE 400
City-State-Zip:	DUBUQUE IA 52001

Title	MGRM
Name	CREMA, LLC
Address	1275 MILWAUKEE AVE.
City-State-Zip:	GLENVIEW IL 60025

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: CHERYL BIRCH

LICENSING SUPERVISOR 01/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date