

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000001825

**Entity Name:** HNI RISK SERVICES OF MICHIGAN, LLC

**Current Principal Place of Business:**

140 MONROE CENTER ST NW, STE. 200  
GRAND RAPIDS, MI 49503

**Current Mailing Address:**

140 MONROE CENTER NW  
SUITE 200  
GRAND RAPIDS, MI 49503 US

**FEI Number:** 27-5095730

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
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

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name ROGERS, JOHN  
Address 140 MONROE CENTER ST NW, STE.  
200  
City-State-Zip: GRAND RAPIDS MI 49503

Title AUTHORIZED REPRESENTATIVE  
Name STEFFEN, NATHAN  
Address 140 MONROE CENTER ST NW, STE.  
200  
City-State-Zip: GRAND RAPIDS MI 49503

Title AUTHORIZED MEMBER  
Name SCHROCK, JACOB  
Address 140 MONROE CENTER ST NW, STE.  
200  
City-State-Zip: GRAND RAPIDS MI 49503

Title AUTHORIZED MEMBER  
Name BARNETT, COLE  
Address 140 MONROE CENTER ST NW, STE.  
200  
City-State-Zip: GRAND RAPIDS MI 49503

Title AUTHORIZED MEMBER  
Name ERIC, KRIEGER  
Address 140 MONROE CENTER ST NW, STE.  
200  
City-State-Zip: GRAND RAPIDS MI 49503

*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:** MEREDITH SLOBODNIK

**AUTHORIZED  
REPRESENTATIVE**

03/31/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date