

2015 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 ST NW, STE. 200
GRAND RAPIDS, MI 49503

FEI Number: 27-5095730

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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 MGR
Name HNI, INC.
Address 16805 W. CLEVELAND AVENUE
City-State-Zip: NEW BERLIN WI 53151

Title MGR
Name MCKINLEY, JAMES 1450
Address 140 MONROE CENTER ST NW, STE.
200
City-State-Zip: GRAND RAPIDS MI 49503

Title MGR
Name PHELPS, RANDALL
Address 140 MONROE CENTER ST NW, STE.
200
City-State-Zip: GRAND RAPIDS MI 49503

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

Title MGR
Name STEFFEN, NATHAN
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: JAMES NATALIZIO

CFO

02/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date