2018 FOREIGN PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 843870

Entity Name: DEARBORN NATIONAL LIFE INSURANCE COMPANY

FILED Sep 28, 2018 Secretary of State CR8265910885

Current Principal Place of Business:

300 EAST RANDOLPH STREET CHICAGO. IL 60601-5099

Current Mailing Address:

701 EAST 22ND STREET LOMBARD, IL 60148 US

FEI Number: 36-2598882 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LYNETTE COLEMAN C/O CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

BURKE, CLAIRE C

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: LYNETTE COLEMAN 09/28/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Name

Title PD & CEO Title VP AND COO

Name BENESH, GREGORY S Name WITWER, MICHAEL W

Address 701 EAST 22ND STREET Address 701 EAST 22ND STREET, SUITE 300

City-State-Zip: LOMBARD IL 60148 City-State-Zip: LOMBARD IL 60148

Title TREASURER, VP OF FINANCE AND Title GENERAL COUNSEL & SECRETARY

COMPLIANCE MANAGEMENT Name LIM, ARLENE K

Address 701 EAST 22ND STREET

Address 701 EAST 22ND STREET, SUITE 300 City-State-Zip: LOMBARD IL 60148

City-State-Zip: LOMBARD IL 60148

Title CHAIRMAN & DIRECTOR Title DIVISION PRESIDENT, CHIEF

ACTUARY, APPOINTED ACTUARY

lame FRANK, MICHAEL E Name SCHWEGEL, JOHN G

Name FRANK, MICHAEL E Name SCHWEGEL, JOHN G

Address 3645 ALICE STREET Address 701 EAST 22ND STREET

City-State-Zip: HELENA MT 59601 City-State-Zip: LOMBARD IL 60148

Title DIRECTOR Title DIRECTOR

Name SMITH, MAURICE S Name MCDONALD, CARL R

Address 300 EAST RANDOLPH STREET Address 300 EAST RANDOLPH STREET

City-State-Zip: CHICAGO IL 60601-5099 City-State-Zip: CHICAGO IL 60601-5099

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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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ARLENE K. LIM GENERAL COUNSEL & 09/28/2018 SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name FOLZ, RALPH C

Address 701 EAST 22ND STREET

City-State-Zip: LOMBARD IL 60148

Title DIRECTOR

Name WOLFF, SHERMAN M

Address 701 EAST 22ND STREET
City-State-Zip: LOMBARD IL 60148

Title DIRECTOR

Name MCCANN, JAMES F

Address 701 EAST 22ND STREET

City-State-Zip: LOMBARD IL 60148