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2019 JAN - L AM II: 11
SECRETARY OF STATE

APPROVED AND FILED

Al ulia

COVER LETTER

Ç.110	ion of Corporations			
SUBJECT:	Western National Mutual Insurar			
	Name of c	orporation	- must include suffix	
Dear Sir or M				
"Certificate o	"Application by Foreign Corpo f Existence," or "Certificate of ced foreign corporation to trans	Good Stand	ling" and check are sul	act Business in Florida," omitted to register the
Please return Jon Hebeisen	all correspondence concerning	this matter	to the following:	
HOHOEL SHIP		Name of P	erson	
Western Nation	nal Mutual Insurance Compnay			
		Firm/Comp	any	
4700 West 77tl		ŕ	,	
		Addres	<u> </u>	
Edina, MN 554	35	7 100.00	•	
		ty/State and	d Zip code	
jon.h e beisen@ —————	wnins.com			
	E-mail address: (to	be used fo	r future annual report	notification)
For further inf	ormation concerning this matte	r, please ca	11:	
Jon Hebeisen	, , , , , , , , , , , , , , , , , , , ,			
Name	of Person	Area Code	Daytime Telep	hone Number
Regist Divisio Cliftor 2661•E Tallah	ET/COURIER ADDRESS: ration Section on of Corporations Building Executive Genter Gircle assee, FL 32301		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations o
Enclosed is a c	heck for the following amount:			
J_\$ 70.00 Fili	ng Fee S78.75 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of o	al Mutual Insurance Company corporation; must include "INCORPORATED corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,	,,
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)
Minnesota 2.	3	41-0430825	
	y under the law of which it is incorporated) 5.	(FEI number, if app Perpetual	licable)
(Date	of incorporation) usiness in Florida	(Date of duration, if other the	nan perpetual)
7	(SEE SECTIONS 607.1501 & 607.1 Street, Edina, MN 55435-4818	n Florida, if prior to registration) 502, F.S., to determine penalty liability	·)
P.O. Box 1463, N	(rrine) Ainneapolis, MN 55440-1463	pal office address)	
	(Current maili	ng address, if different)	2019 JAN SECRET
8. Name and stree	<u>t address</u> of Florida registered agent: (P.0	O. Box NOT acceptable)	
Name:	C T Corporation System		YSSE!
Office Address:	1200 South Pine Island Road	_ 	AM II: OF STA E, Flor
	_ Plantation	, Florida 33324	₩ <u>₩</u>
	(City)	(Zip code)	

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Nichol McCroy, Assistant Secretary
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

	mes and business addresses of officers and/or directors:			
	Stephen J. McFarland			
	n: 247 Logistics, 247 Monroe St. N, Hudson, WI			
Vice Cha	Stuart C. Henderson	<u> </u>		
Address:	Western National Mutual Insurance Company, 4700 West 77th Street, Edina, MN 55435			
Director:	Kathleen M. Cooney	· · · · ·		
	7833 West 96th Street, Minneapolis, MN 55438	SECR	2019 J <i>t</i>	
Director:	Paul A. Johnson	ETARY MASSE	AN -4	PPRO
Address:	Xcel Energy, 401 Nicollet Mall, 4th Floor, Minneapolis, MN 55401	0F \$11 E, F 0		0 VE
	Stuart C, Henderson Western National Mutual Insurance Company, 4700 West 77th Street, Edina, MN 55435			
√ice Pres	Richard E. Long			
	Western National Mutual Insurance Company, 4700 West 77th Street, Edina, MN 55435			
Secretary	Jon R. Hebeisen			
ddress:	Western National Mutual Insurance Company, 4700 West 77th Street, Edina, MN 55435			
reasurer	Peter. H. Corning : Western National Mutual Insurance Company, 4700 West 77th Street, Edina, MN 55435			
	If necessary, you may attach an addendum to the application listing additional officers and	d/or directo	rs.	
he offic	Signature of Director or Officer rer or director signing this document (and who is listed in number 11 above) affirms that the or she is aware that false information submitted in a document to the Departme regree felony as provided for in s.817.155, F.S.	ne facts statent of State	ed her	rein tutes
3. <u>Jon F</u>	R. Hebeisen. Vice President, General Counsel (Typed or printed name and capacity of person signing application)	<u>-</u>		
	(13 ped of printed name and capacity of person signing apprication)			

Addendum to 11a:

Director: Richard T. Murphy, Jr.

Address: Murphy Warehouse Company, 701 24th Avenue SE, Minneapolis, MN 55414

Director: John G. Kapanke

Address: 1928 James Avenue South, Minneapolis, MN 55403

Director: Kaye O'Leary

Address: RiverRock Consulting, 935 Lake Street East, Unit 405, Wayzata, MN 55391

Director: Michael J. Pesch

Address: St. Cloud State University, 720 4th Avenue South, St. Cloud, MN 56301

Director: Robert R. Ditmore

Address: 16740 Jacana Court, Lakeville, MN 55044

Addendum to 11b:

Officer: Jeffrey J. Couchman

Address: Western National Mutual Insurance Company, 4700 West 77th Street, Edina, MN 55435

Officer: Richard B. Kalina

Address: Western National Mutual Insurance Company, 4700 West 77th Street, Edina, MN 55435

Officer: Michael R. Braun

Address: Western National Mutual Insurance Company, 4700 West 77th Street, Edina, MN 55435

SECRETARY OF STATE

APPROVED AND FILED



Certificate of Authority/Compliance Minnesota Department of Commerce

NAIC No.: 15377

Date Licensed in Minnesota: 08-28-1916

State/Country of Domicile: Minnesota

WESTERN NATIONAL MUTUAL INSURANCE COMPANY

has complied with all the requirements and laws of the State of Minnesota and is hereby authorized to transact the business of an insurance company under M.S. 60A.06, Subd. 1, clauses

01-Fire and Allied Lines

02A-Marine

02B-Personal Property Floater Risks

03-Boiler and Machinery

05A-Accident and Health

05B-Workers Compensation

06-Fidelity and Surety

08-Glass

09A-Burglary and Theft

09B-Securities and Drafts

09C-Personal Property Floater On Individuals

09D-Water Damage

10-Livestock

12-Automobile

13-General Liability

14-Elevator

15-Legal Expense

This certificate shall remain in effect until suspended, revoked, or otherwise legally terminated.

IN TESTIMONY WHEREOF, I have hereunto set my hand at my office in the City of St. Paul, Minnesota.

December 13, 2018

JESSICA LOOMAN Commissioner