

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000010198

Entity Name: TI MAILING SERVICES LLC**Current Principal Place of Business:**1716 LOCUST STREET
DES MOINES, IA 50309**Current Mailing Address:**1716 LOCUST STREET
ATTN: LEGAL DEPARTMENT
DES MOINES, IA 50309 US**FEI Number:** 81-4712001**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
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:** MICHAEL JONES - ASSISTANT SECRETARY

03/25/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT, CEO
Name CERYANEC, JOSEPH H
Address 1716 LOCUST STREET
City-State-Zip: DES MOINES IA 50309

Title VP
Name ZIESER, JOHN S
Address 1716 LOCUST STREET
City-State-Zip: DES MOINES IA 50309

Title AUTHORIZED MEMBER
Name TI CUSTOMER SERVICE, INC.
Address 1716 LOCUST STREET
City-State-Zip: DES MOINES IA 50309

Title TREASURER
Name WAGNER, KEVIN M.
Address 1716 LOCUST STREET
City-State-Zip: DES MOINES IA 50309

Title SECRETARY
Name KAUT, NORBERT W
Address 1716 LOCUST STREET
City-State-Zip: DES MOINES IA 50309

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: NORBERT KAUT**SECRETARY**

03/25/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date