

1.) CORPORATION NAME: <b>Ameriprise Auto &amp; Home Insurance Agency, Inc.</b>	DUE DATE: <b>9/30/2015</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM          4701 COX ROAD, SUITE 285          GLEN ALLEN, VA</b>	SCC ID NO: <b>F1525163</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
CLASS	AUTHORIZED				
COMMON	100				
4.) STATE OR COUNTRY OF INCORPORATION: <b>WI</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3500 PACKERLAND DRIVE

CITY/ST/ZIP: DEPERE, WI 54115

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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| NAME: JON PATRICK GINGRICH<br>TITLE: PRES/CEO<br>ADDRESS: 3500 PACKERLAND DRIVE<br>CITY/ST/ZIP/CO: DEPERE, WI 54115    | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
| NAME: JAMES LOUIS HAMALAINEN<br>TITLE: TREASURER<br>ADDRESS: 3500 PACKERLAND DRIVE<br>CITY/ST/ZIP/CO: DEPERE, WI 54115 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |  |
| NAME: SUSAN M. BELTZ<br>TITLE: ASST SECRETARY<br>ADDRESS: 3500 PACKERLAND DRIVE<br>CITY/ST/ZIP/CO: DEPERE, WI 54115    | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |  |
| NAME: THOMAS RICHARD MOORE<br>TITLE: SECRETARY<br>ADDRESS: 3500 PACKERLAND DRIVE<br>CITY/ST/ZIP/CO: DEPERE, WI 54115   | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |  |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ SUSAN M. BELTZ	SUSAN M. BELTZ, ASST SECRETARY	7/24/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.