

1.) CORPORATION NAME:

**First Dakota Indemnity Company**

DUE DATE: **8/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1905571**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,500,000
OTH	2,500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**SD**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 300 CHERAPA PL  
STE 401

CITY/ST/ZIP: SIOUX FALLS, SD 57103

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.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RICHARD E JOHNSON	
TITLE:	PRESIDENT	
ADDRESS:	300 CHERAPA PLACE	
	STE 401	
CITY/ST/ZIP/CO:	SIOUX FALLS, SD 57103	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ROBERT J HOLLAN	
TITLE:	SVP/SEC	
ADDRESS:	300 CHERAPA PL	
	STE 401	
CITY/ST/ZIP/CO:	SIOUX FALLS, SD 57103	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	THEODORE A BRANDNER	
TITLE:	DIRECTOR	
ADDRESS:	300 CHERAPA PL	
	STE 401	
CITY/ST/ZIP/CO:	SIOUX FALLS, SD 57103	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RALPH E JOHNSON	
TITLE:	DIRECTOR	
ADDRESS:	300 CHERAPA PLACE	
	STE 401	
CITY/ST/ZIP/CO:	SIOUX FALLS, SD 57103	

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/ ROBERT J HOLLAN	ROBERT J HOLLAN, SVP/SEC	7/21/2015
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.