

CERTIFICATE OF RENEWAL OF ASSUMED NAME

Form Revision Date 07/2016

For use by DOMESTIC PROFIT CORPORATION

Pursuant to the provisions of Act 284, Public Acts of 1972, the undersigned execute the following Certificate:

1. The identification number assigned by the Bure	eau is:	800102679
2. The name of the profit corporation is:		MEADOWBROOK, INC.
3. The assumed name under which business is to be transacted is:	MEADOWBROOK INSURANCE AGENCY	
4. The registration of the assumed name is extended for a period expiring on December 31st of the fifth full calendar year following the year in which this renewal is filed, unless sooner terminated.		
This document must be signed by an authorized officer or agent (corporations); a member, manager, or an authorized agent (limited liability companies); or by a general partner (limited partnerships):		
Signed this 19th Day of October, 2021 by:		
Signature	Title	Title if "Other" was selected
Geoff Downer	Authorized Agent	
By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.		

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

FILING ENDORSEMENT

This is to Certify that the CERTIFICATE OF RENEWAL OF ASSUMED NAME

for

MEADOWBROOK, INC.

ID Number: 800102679

to transact business under the assumed name of

MEADOWBROOK INSURANCE AGENCY

received by electronic transmission on October 19, 2021 , is hereby endorsed.

Filed on October 19, 2021 , by the Administrator.

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.

Expiration Date: December 31, 2026



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 19th day of October, 2021.

Jenda '

Linda Clegg, Director Corporations, Securities & Commercial Licensing Bureau