



Secretary of State
Statement and Designation by
Foreign Insurer Corporation

S&DC-INS

For Office Use Only

-FILED-

File No.: 6542960

Date Filed: 1/17/2025

IMPORTANT - Read Instructions before completing this form.

Must be submitted with a current **Certificate of Good Standing** issued by the government agency where the corporation was formed. See Instructions.

Must be submitted with a certificate by the California Insurance Commissioner approving the corporate name. For more information, go to www.insurance.ca.gov.

Filing Fee – \$100.00 (for a foreign stock corporation) or \$30.00 (for a foreign nonprofit corporation)

Certified Copy Fee (Optional) - \$5.00

Note: Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <https://www.ftb.ca.gov/>.

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1. Corporate Name (Go to www.sos.ca.gov/business/be/name-reservations for general corporate name requirements and restrictions.)

2. Jurisdiction (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

Omaha National Insurance Company	NE
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3. Business Addresses (Enter the **complete** business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box 9110 West Dodge Road Suite 300	City (no abbreviations) Omaha	State NE	Zip Code 68114
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code
c. Mailing Address of Principal Executive Office, if different than Item 3a	City (no abbreviations)	State	Zip Code

4. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL – Complete Items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code

CORPORATION – Complete Item 4c. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 4a or 4b

C T Corporation System

5. Insurer Statement

This corporation will be subject to the California Insurance Code as an insurer.

6. Read and Sign Below (See instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

Signature

James A. Hempel, Jr.
 Type or Print Name

STATE OF NEBRASKA

United States of America, } ss.
State of Nebraska }
}

Secretary of State
State Capitol
Lincoln, Nebraska

I, Robert B. Evnen, Secretary of State of the
State of Nebraska, do hereby certify that

OMAHA NATIONAL INSURANCE COMPANY

**incorporated on March 29, 2017 and is duly incorporated under the law of
Nebraska;**

**that no occupation taxes due from and assessable against the Corporation are
unpaid and have become delinquent;**

**that no annual or biennial report required to be forwarded by the
Corporation to the Secretary of State has become delinquent;**

that Articles of Dissolution have not been filed.

*This certificate is not to be construed as an endorsement,
recommendation, or notice of approval of the entity's financial
condition or business activities and practices.*

In Testimony Whereof,

I have hereunto set my hand and
affixed the Great Seal of the
State of Nebraska on this date of

December 4, 2024



Robert B. Evnen

Secretary of State

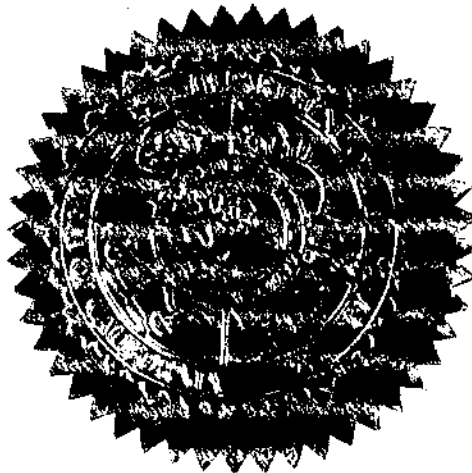
STATE OF CALIFORNIA
DEPARTMENT OF INSURANCE

Oakland

I, RICARDO LARA, Insurance Commissioner of the State of California, do hereby certify that on the date specified herein the name **Omaha National Insurance Company, a Nebraska corporation** has been approved and reserved in California by a **foreign insurer** for a period of 180 days from the date herein and during the pendency in good faith of an application for a Certificate of Authority.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal on the day and year specified below.

RICARDO LARA
Insurance Commissioner



Pretrice M. Curry-Bossett

By:

Pretrice M. Curry-Bossett
Senior Legal Analyst
On Behalf of
Michael Martinez
Chief Deputy Commissioner
January 8, 2025

A foreign or alien corporation must attach this Certificate to its Statement and Designation to obtain a Certificate of Qualification from the California Secretary of State.

Note: This Certificate does not authorize the subject entity to transact business in California unless and until a Certificate of Authority or License has been issued.