05/13/2014



Form PTO-1594 (Rev. 12-11)
OMB Collection 0651-0027 (exp. 04/30/2)

103667528

U.S. DEPARTMENT OF COMMERCE nited States Patent and Trademark Office

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.		
1. Name of conveying party(ies): EquiTrust Life Insurance Company	2. Name and address of receiving party(ies) Additional names, addresses, or citizenship attached? No Name: EquiTrust Life Insurance Company	
☐ Individual(s) ☐ Association ☐ Partnership ☐ Limited Partnership ☒ Corporation- State:lowa ☐ Other	Street Address: City: Chicago State: Illinois Country: Zip: Individual(s) Citizenship Association Citizenship Partnership Citizenship Limited Partnership Citizenship Corporation Citizenship Illinois Other Citizenship If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No (Designations must be a separate document from assignment)	
A. Trademark Application No.(s) Text C. Identification or Description of Trademark(s) (and Filing	B. Trademark Registration No.(s) Additional sheet(s) attached? Yes No	
5. Name & address of party to whom correspondence concerning document should be mailed: Name: G. Brian Pingel	6. Total number of applications and registrations involved:	
Internal Address: BrownWinick Law Firm Street Address: 666 Grand Avenue - Suite 2000	7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ Authorized to be charged to deposit account Enclosed	
City: Des Moines State: IA Zip: 50309 Phone Number: 515-242-2428 515-242-2428 Docket Number: 22429/0001 22429/0001 Email Address: rjohnson@brownwinick.com 4	8. Payment Information: Deposit Account Number 503021 Authorized User Name BrownWinick Law Frim	
9. Signature: Signature G. Brian Pingel Name of Person Signing	May 5, 2014 Date Total number of pages including cover sheet, attachments, and document:	

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Branch, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

EquiTrust Life Insurance Company

Trademark Application Nos.	Trademark Registration Nos.
85/829,096	4,450,267
85/842,227	2,595,710
85/841,886	3,165,798
	4,453,740
	2,286,397
	2,250,530
	2,933,477
	2,802,783
	2,986,618
	3,531,395
	3,313,185
	3,393,340
	3,370,724
	3,409,734
	3,516,887
	3,516,886
	3,935,556
	3,867,711
	4,453,742

ARTICLES OF REORGANIZATION OF EQUITRUST LIFE INSURANCE COMPANY

ARTICLE I

NAME AND ADDRESS OF COMPANY

The name of the Corporation is EquiTrust Life Insurance Company and its principal place of business is Chicago, Illinois, 60606

ARTICLE II

DURATION

The period of its duration is perpetual.

ARTICLE III

<u>PURPOSE</u>

The purpose for which this Corporation is organized is to engage in any lawful activity within the purpose for which insurance corporations may be organized under the provision of Article 2, § 215 ILCS 5/4, Sec. 4, Class 1. (a) Life, and any predecessor statutes of the Illinois Insurance Code.

ARTICLE IV

CAPITALIZATION

The aggregate number of shares which the Corporation has authority to issue is 2,500, par value \$1,500 per share, and at least 2,000 shall be issued.

ARTICLE V

DIRECTORS

The governing body of the Corporation is the Board of Directors, elected annually by the shareholders, and shall be composed of not less than 3 nor more than 21 natural persons who are shareholders, except where the Company is a wholly owned subsidiary, and who are at least 18 years of age and at least 3 of whom are residents and citizens of this State. The exact number of directors within the minimum and maximum required by Illinois Law shall be fixed by the Bylaws. Their terms and the manner of their election shall be as provide in the By-laws. The Board of Directors may make and amend the By-laws of the Corporation.

ARTICLE VI

INDEMNITY

The Corporation shall indemnify a director or officer for liability to the fullest extent permitted by the Illinois Insurance Code, 215 ILCS 5/10 (7) (a) though (h), for any action taken, or any failure to take any action, as a director or officer, except liability for any of the following: (1) receipt of financial benefit by a director or officer to which the director officer is not entitled; (2) an intentional infliction of harm on the Corporation or the shareholders; (3) an intentional violation of criminal law. Without limiting the foregoing, the Corporation shall exercise all of its permissive powers as often as necessary to indemnity and advance expenses to its directors and officers to the fullest extent permitted by law. If the Illinois Insurance Code is hereafter amended to authorize broader indemnification, then the indemnification obligations of the Corporation shall be deemed amended automatically and without any further action to require indemnification and advancement of funds to pay for or reimburse expenses of its directors and officers to the fullest extent permitted by law. Any repeal or modification of this Article by the shareholder of the Corporation shall be prospective only and shall not adversely affect any indemnification obligations of the Corporation with respect to any state of facts existing at or prior to the time of such repeal or modification.

ARTICLE VII

FISCAL YEAR

The Corporation's fiscal year shall begin on January 1 of each year and end on December 31 of each year.

ARTICLE VIII

REGISTERED OFFICE AND REGISTERED AGENT

The address of the registered office of the Corporation shall be the same as its principal place of business in Chicago, Illinois, 60606.

ARTICLE IX

AMENDMENT

These Articles of Reorganization may be amended at any meeting of shareholders by the affirmative vote of a majority of the shareholders present, in person or by proxy.

These Articles of Reorganization were duly approved to be effective upon approval in accordance with 215 ILCS 5/181, by the sole shareholder of EquiTrust Life Insurance Company on August 19, 2013 and supersede all prior Articles of Incorporation. These Articles of

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Reorganization consolidate and supersede all prior amendments to the original Articles of Incorporation.

IN WITNESS WHEREOF, these Articles of Reorganization are executed on behalf of EquiTrust Life Insurance Company.

Dated this 26 th day of August, 2013.

Name: DAVID'L

Title: PRESIDENT

By:

Name: JAMES L. FOORMAN

Title: SECRETARY

State of Illinois

County of Look

This instrument was acknowledged before me on August 20, 2013, by David L. Korman and James L. Foorman, the President and Secretary of EquiTrust Life Insurance Company.

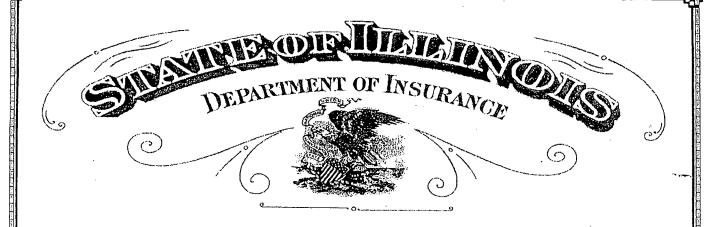
OFFICIAL SEAL KURT B BALDER NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires Nov. 29, 2016

signature of notary public

Approved _

8/29/13

State of Illinois Department of Insurance



WHEREAS, the <u>EquiTrust Life Insurance Company</u> located at <u>Chicago</u> in the State of <u>Illinois</u> has complied with all of the requirements of the "*Illinois*" Insurance Code" applicable to said Company.

NOW, THEREFORE, I, the undersigned, Director of Insurance of the State of Illinois, do hereby authorize the said Company to transact its appropriate business as set forth under Clause(s) (a) and (b) of Class 1 of Section 4 of the "Illinois Insurance Code" in this State, in accordance with the laws thereof.

Date: August 29, 2013

DEPARTMENT OF INSURANCE OF THE STATE OF ILLINOIS

ANDREW BORON

DIRECTOR

Certificate of Authority (Domestic)

TRADEMARK REEL: 005277 FRAME: 0509

RECORDED: 03/18/2014