

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM412566

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
American Family Mutual Insurance Company		01/01/2017	Corporation: WISCONSIN
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	American Family Mutual Insurance Company, S.I.		
<b>Street Address:</b>	6000 American Parkway		
<b>City:</b>	Madison		
<b>State/Country:</b>	WISCONSIN		
<b>Postal Code:</b>	53783		
<b>Entity Type:</b>	Corporation: WISCONSIN		
<b>PROPERTY NUMBERS Total: 21</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Serial Number:</b>	87034858	AMERICANFAMILYCONNECT	
<b>Serial Number:</b>	87034847	AMFAMCONNECT	
<b>Serial Number:</b>	87034814	KNOWYOURDRIVE	
<b>Serial Number:</b>	86869996	CONNECT PARTNER DISCOUNT	
<b>Serial Number:</b>	86818534	AMERICAN FAMILY INSURANCE CHAMPIONSHIP	
<b>Registration Number:</b>	5004255	PROACTIVE HOME PROTECTION	
<b>Registration Number:</b>	4952001	AMERICAN FAMILY VENTURES	
<b>Registration Number:</b>	4875776	INSURE CAREFULLY, DREAM FEARLESSLY.	
<b>Registration Number:</b>	4800442	AMERICAN STAR EXCELLENCE IN CUSTOMER EXP	
<b>Registration Number:</b>	4708982	MYSAFETYVALET	
<b>Registration Number:</b>	4671784	SIMPLYPROTECTED	
<b>Registration Number:</b>	4379818	DREAMBANK	
<b>Registration Number:</b>	4724182	DREAMBANK AMERICAN FAMILY INSURANCE	
<b>Registration Number:</b>	3833116	MY AMFAM	
<b>Registration Number:</b>	3833115	AMFAM	
<b>Registration Number:</b>	3428789	AMERICAN STAR	
<b>Registration Number:</b>	2880618	ALL YOUR PROTECTION UNDER ONE ROOF	
<b>Registration Number:</b>	2670923	AMERICAN FAMILY	
<b>Registration Number:</b>	2073900		
<b>TRADEMARK</b>			

OP \$540.00 87034858

Property Type	Number	Word Mark
Registration Number:	0773380	AMERICAN FAMILY INSURANCE
Registration Number:	0773381	AMERICAN FAMILY

**CORRESPONDENCE DATA**

**Fax Number:** 6082584258

*Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.*

**Phone:** 608 258-4204

**Email:** jrodriguez@foley.com, ipdocketing@foley.com

**Correspondent Name:** Tricia L. Schulz

**Address Line 1:** 150 East Gilman Street

**Address Line 2:** Suite 5000

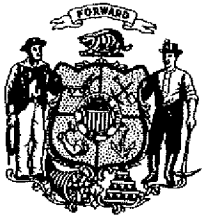
**Address Line 4:** Madison, WISCONSIN 53703

<b>NAME OF SUBMITTER:</b>	Tricia L. Schulz
<b>SIGNATURE:</b>	/tschulz/
<b>DATE SIGNED:</b>	01/17/2017

**Total Attachments: 2**

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source=AFMIC, S.I. Certificate of Authority (1-1-2017)#page2.tif



State of Wisconsin | OFFICE OF THE COMMISSIONER OF INSURANCE

Scott Walker, Governor  
Theodore K. Nickel, Commissioner

Wisconsin.gov

125 South Webster Street • P.O. Box 7873  
Madison, Wisconsin 53707-7873  
Phone: (608) 266-3585 • Fax: (608) 266-9935  
E-Mail: [ociinformation@wisconsin.gov](mailto:ociinformation@wisconsin.gov)  
Web Address: [oci.wi.gov](http://oci.wi.gov)

December 28, 2016

AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.  
ANN WENZEL ASSISTANT SECRETARY  
6000 AMERICAN PKY  
MADISON WI 53783

Please find enclosed the amended Certificate of Authority indicating:

- a.  Name Change
- b.  Redomestication
- c.  Added or Deleted Line of Business
- d.  Added or Deleted Counties (applies to Wisconsin Town Mutual Companies only)

If you have any questions, please feel free to contact this office.

Sincerely,

Jackie Karls  
License Permit Program Associate  
Bureau of Financial Analysis and Examinations  
Phone: (608)266-9891  
Fax: (608)264-6237  
Email: [jackie.karls@wisconsin.gov](mailto:jackie.karls@wisconsin.gov)

Enclosures



# *Certificate of Authority* *State of Wisconsin*

Office of the Commissioner of Insurance

**Certificate No.** 110719  
**Date Effective:** 01/01/2017  
**License Chapter:** 611 Wis. Stat.

This is to Certify that, pursuant to the Insurance Laws of the state of Wisconsin,

**American Family Mutual Insurance Company, S.I.**

**WISCONSIN**

Has paid the fees and taxes required by law and that it is hereby authorized to transact the business of:

Aircraft  
Automobile  
Disability Insurance  
Fidelity Insurance  
Fire, Inland Marine and Other Property Insurance  
Liability and Incidental Medical Expense Insurance (other than automobile)  
Miscellaneous  
Ocean Marine Insurance  
Surety Insurance  
Workers Compensation Insurance

Subject to the following limitations:

In accordance with s. 644.07 (10) (a), Wis. Stat., American Family Mutual Insurance Company, S.I.'s organization date shall be the same as American Family Mutual Insurance Company's organization date (May 18, 1927).

In the state of Wisconsin as long as the insurer continues to conform to the authority granted by this certificate, is in full compliance with all, and not in violation of any, of the applicable laws and lawful requirements made under authority of the laws of the state of Wisconsin.

Commissioner of Insurance

OCI 23-001 (R 11/2015)

**RECORDED: 01/17/2017**

**TRADEMARK**  
**REEL: 005967 FRAME: 0582**