

Department of Insurance

State of Indiana

OFFICE OF

Insurance Commissioner

**CERTIFICATE OF AUTHORITY**

Indianapolis, Indiana October 3, 2014

Whereas, the *Western National Mutual Insurance Company* an insurance company organized under the laws of *Minnesota*, and located in *Edina, Minnesota* having complied with all the requirements of the laws regulating *Mutual Property and Casualty* insurance Companies doing business in the State of *Indiana*.

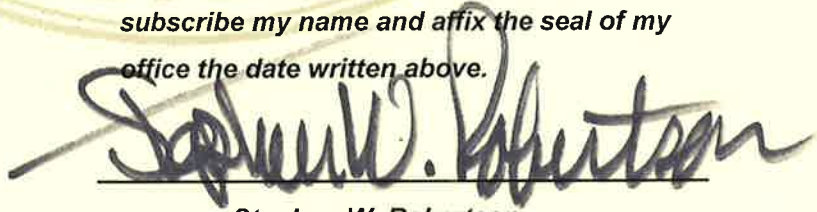
Therefore, as Insurance Commissioner of the State of *Indiana*, by virtue of authority vested in me by law, I do hereby authorize, empower and license the above named company to transact its appropriate business of:

***Class II (k excluding bail bonds)***

through its duly authorized agents in the State of *Indiana*, in accordance with the laws thereof which are applicable to said Company.

IN TESTIMONY WHEREOF I hereunto

subscribe my name and affix the seal of my  
office the date written above.



Stephen W. Robertson

INSURANCE COMMISSIONER

