

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000011423

Entity Name: USPA MEDLEY LOGISTICS, LLC

Current Principal Place of Business:

711 HIGH STREET
DES MOINES, IA 50392

Current Mailing Address:

711 HIGH STREET
DES MOINES, IA 50392 US

FEI Number: 42-0127290

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title M
Name PRINCIPAL LIFE INSURANCE CO
Address 711 HIGH ST
City-State-Zip: DES MOINES IA 50392

Title MANAGER
Name KOERSELMAN, TROY A
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title MANAGER
Name WADLE, BRENDA
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title MANAGER
Name GRAVES, DAVID
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title MANAGER
Name FRITZ, COURTNEY
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title MANAGER
Name STUBBS, KEVIN J.
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHAWNA MURPHY

**RE ENTITY
ADMINISTRATOR**

01/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date