

|  |                        |  |       |  |         |
|--|------------------------|--|-------|--|---------|
| No. <b>W 152752</b>  |                        | <b>Due no later than Jun 30, 2016</b>  |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>                           |         |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                        | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>BHHC SPECIALTY RISK, LLC<br>1314 DOUGLAS STREET,<br>SUITE 1400<br>OMAHA NE 68102 |       | CORPORATION SERVICE COMPANY<br>12550 W EXPLORER DR STE 100<br>BOISE ID 83713 |         |
|  |                        |  |       | 3. <u>New</u> Registered Agent Signature:*                                   |         |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.   |                        |  |       |  |         |
| Office Held  | Name                   | Street or PO Address   | City  | State  | Country |
| MEMBER   | RINGWALT & LIESCHE CO. | 1314 DOUGLAS STREET, SUITE 1400  | OMAHA | NE   | USA     |
| Postal Code 68102  |                        |  |       |  |         |
| 5. Organized Under the Laws of:<br><br><b>NE</b><br><b>W 152752</b>  |                        | 6. Annual Report must be signed.*<br>Signature: BRENNAN S. NEVILLE<br>Name (type or print): BRENNAN S. NEVILLE<br>Date: 06/30/2016<br>Title: AUTHORIZED PERSON                     |       |  |         |
| Processed 06/30/2016   |                        | * Electronically provided signatures are accepted as original signatures.  |       |  |         |