No. C 180562		Annual Report Form 1. Mailing Address: Correct in this box if needed. RBS CITIZENS INSURANCE AGENCY, INC. 1215 SUPERIOR AVE CLEVELAND OH 44144		2. Registered A	2. Registered Agent and Address (NO PO BOX) CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF				12550 W EXF BOISE ID 8				
4. Corporations: Enter No.		ess Addresses of	f President, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT SECRETARY TREASURER	PETER DUNLAP GARY A ASHJIAN CLAIRE COSTA		1215 SUPERIOR AVENUE 1215 SUPERIOR AVE 1215 SUPERIOR AVENUE	CLEVELAND CLEVELAND CLEVELAND	OH OH OH	USA USA USA	44144 44144 44144	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
OH C 180562		Signature: G Name (type		Date: 10/13/2016 Title: SECRETARY				
Processed 10/13/2016		* Electronically provided signatures are accepted as original signatures.						