

No. W 88559		Due no later than Nov 30, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. STARR GLOBAL ACCIDENT & HEALTH INSURANCE AGENCY, LLC 399 PARK AVENUE 9TH FLOOR NEW YORK NY 10022 USA		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name STARR INSURANCE GROUP, INC.	Street or PO Address 399 PARK AVENUE 9TH FLOOR		City NEW YORK	State NY	Country USA	Postal Code 10022
5. Organized Under the Laws of: DE W 88559		6. Annual Report must be signed.* Signature: Dareth Jeffers Name (type or print): Dareth Jeffers Date: 10/15/2012 Title: Poa					
Processed 10/15/2012 * Electronically provided signatures are accepted as original signatures.							