No. C 179939		Du	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Sep 30, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. AUGEO AFFINITY INSURANCE SERVICES, INC. JENNIFER VANSELOW 2561 TERRITORIAL RD SAINT PAUL MN 55114		921 S ORCHA BOISE ID 83	REGISTERED AGENT SOLUTIONS INC 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*		
4. Corporations: Ent	er Names and Busin	ess Addresses of	President, Secretary, and Directors. Treasur	rer (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR PRESIDENT SECRETARY DIRECTOR	JUAN SABA DAVID A KF MICHAEL R DAVID A KF	RISTAL KNOOP	400 MADISON AVE, STE 20T 2561 TERRITORIAL RD 29233 N 48TH ST. 2561 TERRITORIAL RD	NEW YORK ST. PAUL CAVE CREEK ST. PAUL	NY MN AZ MN	USA USA USA USA	10017 55114 85331 55114
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
DE C 179939		Signature: DAVID A KRISTAL Name (type or print): DAVID A KRISTAL			Date: 09/29/2015 Title: PRESIDENT		
Processed 09/29/20	15	* Electronically provided signatures are accepted as original signatures.					