

No. W 153308	Due no later than Jun 30, 2018 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. AFFILIATE ASSET SOLUTIONS, LLC MICHELLE MCCANN 145 TECHNOLOGY PKWY SUITE 100 PEACHTREE CORNERS GA 30092		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
			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	Postal Code
MANAGER	DAVID A STROUT	145 TECHNOLOGY PARKWAY STE 100	PEACHTREE CORNERS	GA	USA	30092
5. Organized Under the Laws of: DE W 153308		6. Annual Report must be signed.* Signature: David A Strout Name (type or print): David A Strout Date: 07/25/2018 Title: Manager				
Processed 07/25/2018		* Electronically provided signatures are accepted as original signatures.				