

No. <b>W 128319</b>		<b>Due no later than Aug 31, 2015</b>		<b>2. Registered Agent and Address (NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  ACA INSURANCE SERVICES, LLC 2650 MCCORMICK DRIVE #200S CLEARWATER FL 33759		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 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 Postal Code
MANAGER	AL MARKETING LLC	2650 MCCORMICK DR STE 200S	CLEARWATER	FL	USA 33759
5. Organized Under the Laws of:  <b>DE W 128319</b>		6. Annual Report must be signed.* Signature: TIMOTHY NORTH Name (type or print): TIMOTHY NORTH Date: 07/07/2015 Title: CEO			
Processed 07/07/2015		* Electronically provided signatures are accepted as original signatures.			