

No. W 123996		Due no later than Apr 30, 2015 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. ALTA RISK, LLC 13220 METCALF, SUITE 370 OVERLAND PARK KS 66213 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE 83705			
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	Name	Street or PO Address		City	State	Country	Postal Code
MANAGER	SCOTT M. PURVIANCE	4725 PIEDMONT ROW DRIVE SUITE 600		CHARLOTTE	NC	USA	28210
MANAGER	MICHAEL STEVEN DECARLO	4725 PIEDMONT ROW DRIVE SUITE 600		CHARLOTTE	NC	USA	28210
5. Organized Under the Laws of: NC W 123996		6. Annual Report must be signed.* Signature: Kelly Lettmann Name (type or print): Kelly Lettmann					
		Date: 04/05/2015 Title: POA					
Processed 04/05/2015 * Electronically provided signatures are accepted as original signatures.							