No. W 126716		Due no later than Jun 30, 2015		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. WIPRO INSURANCE SOLUTIONS LLC ANNUAL REPORTS 2 TOWER CENTER BLVD #2200 EAST BRUNSWICK NJ 08816		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*				
RECEIVED BY	DUE DATE	mos and Addresse	s of at least one Member or Manager.					
Office Held	Name	nes and Addresse	Street or PO Address	City	State	Country	Postal Code	
MANAGER	KRISHNA NA	ICHA	2 TOWER CENTER BLVD #2200	EAST BRUNSWICK	NJ	USA	08816	
MANAGER	MITCHELL MACKLER		2 TOWER CENTER BLVD #2200	EAST BRUNSWICK	NJ	USA	08816	
5. Organized Under the Laws of:		6. Annual Report						
DE W 126716		Signature: Mitchell Mackler			Date: 06/11/2015			
		Name (type or		Title: Secretary				
Processed 06/11/2015	5	* Electronically pr	ovided signatures are accepted as original s	ignatures.				