

No. W 93833		Due no later than Jun 30, 2017 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. MINICO INSURANCE AGENCY, LLC C/O 3H CORPORATE SERVICES LLC 6 CLEMENT AVE SARATOGA SPRINGS NY 12866		3H AGENT SERVICES INC 1215 W HAYS BOISE ID 83702			
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	MICHAEL SCHOFIELD	10851 N BLACK CANYON HWY SUITE 200	PHOENIX	AZ	USA	85029	
MANAGER	TIMOTHY M KENNY	119 N PARK AVENUE 4TH FLOOR	ROCKVILLE CENTRE	NY	USA	11570	
MANAGER	JOHN C LACAVA	119 N PARK AVENUE 4TH FLOOR	ROCKVILLE CENTRE	NY	USA	11570	
MANAGER	SCOTT W EASTLAND	10851 N BLACK CANYON HWY SUITE 200	PHOENIX	AZ	USA	85021	
5. Organized Under the Laws of: AZ W 93833		6. Annual Report must be signed.* Signature: Mary E Schick Name (type or print): Mary E Schick					
		Date: 05/02/2017 Title: CFO					
Processed 05/02/2017 * Electronically provided signatures are accepted as original signatures.							