No. C 141917		Due no later than Dec 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. YORK RISK SERVICES GROUP, INC. MICHAEL KRAWITZ ONE UPPER POND RD BLDG F 4TH FLR PARSIPPANY NJ 07054		2. Registered Ag	Registered Agent and Address (NO PO BOX) CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				No. the state of t				
				BOISE ID 83				
4. Corporations: Enter N	ames and Busin	ness Addresses of Pi	resident, Secretary, and Directors. Treasu	ırer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT	MICHAEL KF RICHARD H	Annual State of the State of th	ONE UPPER POND RD BLDG F 4TH ONE UPPER POND RD BLDG F 4TH		N) U)	USA USA	07054 07054	
5. Organized Under the	Laws of:	6. Annual Report	must be signed.*					
NY		Signature: Michael Krawitz Date: 01/17/2018						
C 141917		Name (type or print): Michael Krawitz			Title: Secretary			
Processed 01/17/2018		* Flectronically pro	ovided signatures are accepted as original	signatures.				