

No. <b>W 83158</b>	<b>Due no later than Apr 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(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>1. Mailing Address: Correct in this box if needed.</b> NETWORK INSURANCE SENIOR HEALTH DIVISION ALG, LLC TERRY DUNCAN 2650 MCCORMICK DR STE 200S CLEARWATER FL 33759 USA		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE 83705			
			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 83158</b>		6. Annual Report must be signed.* Signature: TIMOTHY NORTH Name (type or print): TIMOTHY NORTH Date: 02/17/2015 Title: MGR AL MARKETING LLC				
Processed 02/17/2015		* Electronically provided signatures are accepted as original signatures.				