

No. W 22363		Due no later than Jan 31, 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. INSURANCE ADMINISTRATIVE SOLUTIONS, L.L.C. DARCEY J SHAFFER 17757 US HWY 19 N STE 660 CLEARWATER FL 33764 USA		PARACORP INCORPORATED 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	DELOS H YANCEY, III	210 E. SECOND AVENUE STE 301	ROME	GA	USA	30161	
MEMBER	GULFCOAST ADMINISTRATORS, L.L.C.	210 E. SECOND AVENUE STE 301	ROME	GA	USA	30161	
5. Organized Under the Laws of: FL W 22363		6. Annual Report must be signed.* Signature: Darcey J. Shaffer Name (type or print): Darcey J. Shaffer Date: 11/19/2014 Title: Director, Corporate Relations					
Processed 11/19/2014 * Electronically provided signatures are accepted as original signatures.							