

No. W 159410	Due no later than Dec 31, 2016 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. ROMAN INSURANCE GROUP, LLC PO BOX 922 ATHOL ID 83801		IDAHO DEPT OF INSURANCE DEAN L CAMERON 700 W STATE ST FL 3 BOISE ID 83702			
			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
MEMBER	JAMISON HOOK	PO BOX 922	ATHOL	ID	USA	83801
5. Organized Under the Laws of: WA W 159410	6. Annual Report must be signed.* Signature: jamison hook Name (type or print): jamison hook		Date: 01/03/2017 Title: member			
Processed 01/03/2017		* Electronically provided signatures are accepted as original signatures.				