

No. <b>W 18128</b>		<b>Due no later than Feb 29, 2012</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> REINSURANCE SERVICES, LLC ALLEN COLLINS PO BOX 812 POCATELLO ID 83204		ALLEN COLLINS 200 S MAIN STE 1 POCATELLO ID 83204			
				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	ALLEN COLLINS	PO BOX 715	POCATELLO	ID	USA	83204	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 18128</b>		Signature: Allen Collins				Date: 12/14/2011	
		Name (type or print): Allen Collins				Title: Member	
Processed 12/14/2011		* Electronically provided signatures are accepted as original signatures.					