| No. W 151326 | | Due no later than May 31, 2016 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. ROMARKE INSURANCE BROKERAGE, LLC ROBERT MILLER PO BOX 1297 HYANNIS MA 02601 | | THOMAS DO 700 W STAT BOISE ID 8 | IDAHO DEPT OF INSURANCE THOMAS DONOVAN 700 W STATE FL 3 BOISE ID 83702 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 200 | | nes and Addresses | of at least one Member or Manager. | C'I- | Charles | C | De etel Ce de | |
| Office Held | Name | 1 | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER KELLY C BOLTON | | | 973 IYANNOUGH ROAD | HYANNIS | MA | USA | 02601 | |
| MANAGER MANAGER | MARK S MCCARTIN ROBERT W MILLER, JR. | | 973 IYANNOUGH ROAD 973 IYANNOUGH ROAD | HYANNIS HYANNIS | MA MA | USA USA | 02601 02601 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| MA W 151326 | | Signature: Robe | | Date: 03/30/2016 | | | | |
| | | Name (type or p | | Title: Manager | | | | |
| Processed 03/30/2016 | | * Electronically pro | vided signatures are accepted as original | l signatures. | | | | |