No. <b>W 95082</b>	Due no later than Jul 31, 2016	2. Registered	Registered Agent and Address (NO PO BOX) C T CORPORATION SYSTEM			
Return to:	Annual Report Form					
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		921 S ORCHARD ST STE G BOISE ID 83705			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	SOUTHWEST RISK MANAGEMENT, LLC SAM ABNEY 2855 E BROWN RD	BOISE ID	DOISE 1D 03703			
	STE 28	3. <u>New</u> Regis	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	MESA AZ 85213					
4. Limited Liability Companies: Enter N	lames and Addresses of at least one Member or Manager.					
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER TERRY LA	RSEN 2855 E BROWN RD STE 28	MESA	AZ	USA	85213	
MEMBER JOHN HOL	T 2855 E BROWN ROAD STE 28	MESA	AZ	USA	85213	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
AZ	Signature: Terry Larsen		Date: 06/10/2016			
W 95082	Name (type or print): Terry Larsen		Title: Member			
Processed 06/10/2016	* Electronically provided signatures are accepted as original signatures.					