

No. C 195569		Due no later than Aug 31, 2017 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. IHC SPECIALTY BENEFITS, INC. 5353 WAYZATA BLVD., SUITE 300 MINNEAPOLIS MN 55416 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	DAVID T. KETTIG	485 MADISON AVENUE, 14TH FLOOR	NEW YORK	NY	USA	10022
SECRETARY	LOAN NISSER	485 MADISON AVENUE, 14TH FLOOR	NEW YORK	NY	USA	10022
DIRECTOR	DAVID T. KETTIG	485 MADISON AVENUE, 14TH FLOOR	NEW YORK	NY	USA	10022
DIRECTOR	BRIAN DOW	5353 WAYZATA BLVD, # 300	MINNEAPOLIS	MN	USA	55416
DIRECTOR	DAVID KELLER	5415 EAST HIGH STREET SUITE 300	PHOENIX	AZ	USA	85054
DIRECTOR	TERESA A. HERBERT	485 MADISON AVENUE, 14TH FLOOR	NEW YORK	NY	USA	10022
DIRECTOR	LARRY R. GRABER	12007 RESEARCH BLVD., STE. 201	AUSTIN	TX	USA	78759
5. Organized Under the Laws of: DE C 195569		6. Annual Report must be signed.* Signature: Kelly Lettmann Name (type or print): Kelly Lettmann				
		Date: 07/06/2017 Title: POA				
Processed 07/06/2017		* Electronically provided signatures are accepted as original signatures.				