No. <b>W 151337</b>	Due no later than May 31, 2018		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	Annual Report Form  1. Mailing Address: Correct in this box if needed.  EBERL CLAIMS SERVICE LLC  7726 W. MANSFIELD AVENUE  LAKEWOOD CO 80235		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705  3. New Registered Agent Signature:*			
4. Limited Liability Companies: Enter Na	mes and Addresses of a	it least one Member or Manager.				
Office Held Name		Street or PO Address	City	State	Country	Postal Code
MANAGER WILLIAM KYLE CHAPMAN		8040 FORSYTH BLVD.	ST. LOUIS	MO	USA	63105
MANAGER RYAN L. G	ABLE	8040 FORSYTH BLVD.	ST. LOUIS	MO	USA	63105
MANAGER PATRICK M	CLAUGHLIN	100 CHETWYND DRIVE SUITE 202	ROSEMONT	PA	USA	19010
MANAGER JOHN QUIN	NAGER JOHN QUINN		KING OF PRUSS	SIA PA	USA	19406
5. Organized Under the Laws of:  6. Annual Report m		t be signed.*				
МО	Signature: ADAM STEIMEL		Date: 04/14/2018			
W 151337	Name (type or print): ADAM STEIMEL		Title: POA			
Processed 04/14/2018	* Electronically provided signatures are accepted as original signatures.					