No. W 98803  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Due no later than Dec 31, 2015 Annual Report Form  1. Mailing Address: Correct in this box if needed.  MEDICAL SECURITY CARD COMPANY, LLC 4911 E. BROADWAY SUITE 100 TUCSON AZ 85711		2. Registered A	2. Registered Agent and Address (NO PO BOX)  C T CORPORATION SYSTEM  921 S ORCHARD ST STE G  BOISE ID 83705  3. New Registered Agent Signature:*			
				921 S ORCHA BOISE ID 8				
NO FILING RECEIVED BY	DUE DATE		of at least one Member or Manager.					
Office Held	Name	illes alla Adalesses	Street or PO Address	City	State	Country	Postal Code	
MANAGER MANAGER MANAGER	LORI BRYANT DAVID WHEELER GREG WATANABE		4911 E BROADWAY BLVD 10181 SCRIPPS GATEWAY CT 10181 SCRIPPS GATEWAY CT	TUCSON SAN DIEGO SAN DIEGO	AZ CA CA	USA USA USA	85711 92131 92131	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE W 98803		Signature: Michelle Donato Name (type or print): Michelle Donato		Date: 11/09/2015 Title: POA				
Processed 11/09/2015		* Electronically pro	ovided signatures are accepted as original s	signatures.				