No. W 82833		Due no later than Apr 30, 2013		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. BOB MCCLOSKEY AGENCY, LLC DARLENE HRANKAJ C/O NFP, 500 W. MADISON STREET SUITE 2400 CHICAGO IL 60661 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New Registered Agent Signature:*			
4. Limited Liability Comp	anies: Enter Nar	nes and Addresses of at	least one Member or Manager.	1			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MANAGER	MALIKA S H	IINKSON	340 MADISON AVENUE 20TH FLOOR	NEW YORK	NY	USA	10173
MANAGER	EDWARD O'I	MALLEY	1250 CAPITAL OF TEXAS HWY S BUILDING 2	AUSTIN	TX	USA	78746
MANAGER	BRETT SCH	NEIDER	340 MADISON AVENUE 20TH FLOOR	NEW YORK	NY	USA	10173
5. Organized Under the Laws of: 6. A		6. Annual Report must be signed.*					
NI W 82833		Signature: Brett Schneider		Date: 04/12/2013			
		Name (type or print)	Title: Manager				
Processed 04/12/2013 * Electronically provided signatures are accepted as original signatures.							