

No. W 78506	Due no later than Oct 31, 2015 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. BEECHER CARLSON INSURANCE SERVICES, LLC SIX CONCOURSE PARKWAY SUITE 2300 ATLANTA GA 30328	C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705				
		3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	CHARLES H LYDECKER	220 S. RIDGEWOOD AVE.	DAYTONA BEACH	FL	USA	32114
5. Organized Under the Laws of: CA W 78506	6. Annual Report must be signed.* Signature: Michelle Donato Name (type or print): Michelle Donato		Date: 09/08/2015 Title: POA			
Processed 09/08/2015		* Electronically provided signatures are accepted as original signatures.				