No. W 131827 Return to:		Due no later than Dec 31, 2014 Annual Report Form		Registered Agent and Address (NO PO BOX) CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE 83713 3. New Registered Agent Signature:*												
								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. ASSUREDPARTNERS OF NEW JERSEY, LIMITED LIABILITY COMPANY STEVE LAWRENCE 20 COMMERCE DR., SECOND FL CRANFORD NJ 07016 USA						
4. Limited Liability Co	mpanies: Enter Nar	mes and Addresses of at	t least one Member or Manager.													
Office Held	Name		Street or PO Address										City	State	Country	Postal Code
MEMBER PAUL VREDENBU		NBURG	200 COLONIAL CENTER PKWY					STE 150	LAKE MARY	FL	USA	32746				
MANAGER THOMAS E			200 COLONIAL CENTER PKWY	STE 150) LAKE MARY	FL	USA	32746								
MANAGER	JIM W HENI	DERSON	200 COLONIAL CENTER PKWY	STE 150) LAKE MARY	FL	USA	32746								
5. Organized Under the Laws of:		6. Annual Report must be signed.*														
N		Signature: Paul Vredenburg			Date: 12/12/2014											
W 131827		Name (type or print): Paul Vredenburg			Title: Manager											
Processed 12/12/201	4	* Flectronically provided	d signatures are accepted as orig	inal sign	atures											