No. <b>C 195171</b>		Due no later than Jun 30, 2016		2. Registered /	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.  ARCH INSURANCE SOLUTIONS INC.  MELISSA B GILLIGAN  185 ASYLUM AVENUE  CP II, 16TH FLOOR  HARTFORD CT 06103		C T CORPO 921 S ORCH BOISE ID	C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705  3. New Registered Agent Signature:*			
4. Corporations: Enter Na	mes and Busin	ess Addresses of F	President, Secretary, and Directors. Trea	asurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	CTOR DENNIS R BRAND		300 PLAZA THREE 3RD FLOOR	JERSEY CITY	ŊJ	USA	07311	
DIRECTOR	DAVID H MCELROY		300 PLAZA THREE 3RD FLOOR	JERSEY CITY	ŊĴ	USA	07311	
TREASURER	THOMAS J AHERN		300 PLAZA THREE 3RD FLOOR	JERSEY CITY	ŊĴ	USA	07311	
SECRETARY	ARY PATRICK K NAILS		300 PLAZA THREE 3RD FLOOR	JERSEY CITY	NJ	USA	07311	
PRESIDENT	JOHN P MEI	NTZ	300 PLAZA THREE 3RD FLOOR	JERSEY CITY	NJ	USA	07311	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: Melissa Gilligan		Date:	Date: 07/19/2016			
C 195171		Name (type or print): Melissa Gilligan		Title:	Title: Assistant Secretary			
Processed 07/19/2016		* Electronically provided signatures are accepted as original signatures.						