

No. W 83158		Due no later than Apr 30, 2011		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. NETWORK INSURANCE SENIOR HEALTH DIVISION ALG, LLC TERRY DUNCAN 2536 COUNTRYSIDE BLVD STE 501 CLEARWATER FL 33763 USA		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706 USA	
				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	AL MARKETING, LL	2536 COUNTRYSIDE BLD SUITE 501	CLEARWATER	FL	USA 33763
5. Organized Under the Laws of: DE W 83158		6. Annual Report must be signed.* Signature: Terry Duncan Name (type or print): Terry Duncan Date: 02/11/2011 Title: Licensing Specialist			
Processed 02/11/2011		* Electronically provided signatures are accepted as original signatures.			