No. <b>W 163483</b>		The state of the s		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		REGISTERED AGENT SOLUTIONS INC 921 S ORCHARD ST STE G BOISE ID 83705			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  THOMPSON FLANAGAN EXECUTIVE LIABILITY GROUP, LLC MELISSA BRCIK 626 W JACKSON BLVD #500					
		CHICAGO IL 60661		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Com	panies: Enter Na	mes and Addresses	s of at least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER	LARKIN FLANAGAN		626 W JACKSON BLVD #500	CHICAGO	IL	USA	60661
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
IL W 163483		Signature: Lar	Date: 03/08/2018				
		Name (type or	Title: Member				
Processed 03/08/2018		* Electronically provided signatures are accepted as original signatures.					