No. W 137816		Due no later than May 31, 2017	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TRANSPORTATION INSURANCE ADVISORS, LLC 463 MOUNTAIN VIEW DR 206					
		COLCHESTER VT 05446					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compa	nies: Enter Na	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER JOHN S LIG		HT 321 CROOKED CREEK RD	COLCHESTER	VT	USA	05446	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
DE		Signature: Donald A Wells	Date: 03/22/2017				
W 137816		Name (type or print): Donald A Wells	Title: CFO				
Processed 03/22/2017 * Electronically provided signatures are accepted as original signatures.							