No. C 199762			oue no later than Sep 30, 2017	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. LIAZON BENEFITS, INC. 199 SCOTT STREET, SUITE 800 BUFFALO NY 14204		921 S ORCH/ BOISE ID 8	NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ass Addresses o	f Procident Secretary and Directors Treas	ourer (entional)				
Office Held	Name	C33 Addi C33C3 C	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	FOR ASHOK SUBRAMANIAN		901 N. GLEBE ROAD 901 N. GLEBE ROAD	ARLINGTON ARLINGTON	VA VA	USA USA	22203 22203	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: k	Celly Lettmann		Date: 08/21/2017			
C 199762		Name (type		Title: POA				
Processed 08/21/2017	* Electronically provided signatures are accepted as original signatures.							