

No. <b>W 110602</b>	<b>Due no later than Jan 31, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> MASSACHUSETTS BENEFIT ADMINISTRATORS LLC AMANDA HIGHTOWER 25 TECHNOLOGY PLACE HINGHAM MA 02043		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705			
			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	PATRICK GILLIGAN	101 HUNTINGTON AVENUE	BOSTON	MA	USA	02199-7611
MANAGER	JOSEPH NEVINS	101 HUNTINGTON AVENUE	BOSTON	MA	USA	02199-7611
5. Organized Under the Laws of:  <b>MA W 110602</b>	6. Annual Report must be signed.* Signature: Joseph Nevins Name (type or print): Joseph Nevins		Date: 02/01/2018 Title: Manager			
Processed 02/01/2018		* Electronically provided signatures are accepted as original signatures.				