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| No. W 114164 | | Due no later than May 31, 2013 | | 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. BMI BENEFITS, L.L.C. 76 MAIN ST MATAWAN NJ 07747 | | C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 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 | EDWARD O'MALLEY | 1250 CAPITAL OF TEXAS HWY S BUILDING 2 | AUSTIN | TX | USA | 78746 | |
| MANAGER | MALIKA S. HINKSON | 340 MADISON AVENUE 20TH FLOOR | NEW YORK | NY | USA | 10173 | |
| MANAGER | BRETT SCHNEIDER | 340 MADISON AVENUE 20TH FLOOR | NEW YORK | NY | USA | 10173 | |
| 5. Organized Under the Laws of: NJ W 114164 | | 6. Annual Report must be signed.* Signature: Lori M. Lieser Name (type or print): Lori M. Lieser | | | | | |
| | | Date: 05/28/2013 Title: Vice President | | | | | |
| Processed 05/28/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |