No. W 92528			Due no later than Apr 30, 2012	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:			Annual Report Form	to become and the same of the same	CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing	g Address: Correct in this box if needed.	N - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
		CONSUMER SELECT INSURANCE OF AMERICA, LLC SHAWNA BAUGHMAN 22 EXECUTIVE PARK, SUITE 100 IRVINE CA 92614 USA		USA	50000 AV			
				3. New Regist	3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Co	mpanies: Enter Na	ames and Addre	esses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER KELLY A DUN		UNN	22 EXECUTIVE PARK, SUITE 100	IRVINE	CA	USA	92614	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
FL W 92528		Signature: Shawna			Date: 02/27/2012			
		Name (typ	e or print): Shawna		Title: Baughman			
Processed 02/27/2012 * Electronically provided signatures are accepted as original signatures.								