No. W 166110		Due no later than May 31, 2018			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		Annual Report Form 1. Mailing Address: Correct in this box if needed. ASSUREDPARTNERS OF MICHIGAN, LLC 200 COLONIAL CENTER PKWY STE 150		ed.	CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
		LAKE MARY FL 32746			3. New Registered Agent Signature:*			
4. Limited Liability Comp	panies: Enter Nar	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	THOMAS E	RILEY	200 COLONIAL CENTER PKWY	STE 150	LAKE MARY	FL	USA	32746
MANAGER	PAUL VREDENBURG		200 COLONIAL CENTER PKWY			FL	USA	32746
MANAGER	JIM W HENDERSON		200 COLONIAL CENTER PKWY			FL	USA	32746
MEMBER	ASSUREDPARTNERS CAPITAL, INC.		200 COLONIAL CENTER PKWY	STE 150	LAKE MARY	FL	USA	32746
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
MI		Signature: Paul Vredenburg			Date: 05/09/2018			
W 166110		Name (type or print): Paul Vredenburg			Title: Manager			
Processed 05/09/2018		* Electronically provided	signatures are accepted as orig	inal signa	itures.			