No. C 195569		Due no later than Aug 31, 2015		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. IHC SPECIALTY BENEFITS, INC. 5353 WAYZATA BLVD., SUITE 300 MINNEAPOLIS MN 55416						
NO FILING FEE IF RECEIVED BY DUE DATE				or <u>i.igir</u> regioto.		g. 14 ta. 5.		
4. Corporations: Ente	r Names and Busin	ess Addresses of Preside	ent, Secretary, and Directors. Treasurer	(optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	DAVID T. K	ETTIG	485 MADISON AVENUE, 14TH FLOOR	NEW YORK	NY	USA	10022	
SECRETARY	RETARY LOAN NISSER		485 MADISON AVENUE, 14TH FLOOR	NEW YORK	NY	USA	10022	
TREASURER	EASURER DAVID T. KETTIG		485 MADISON AVENUE, 14TH FLOOR	NEW YORK	NY	USA	10022	
DIRECTOR	DAVID T. KETTIG		485 MADISON AVENUE, 14TH FLOOR	NEW YORK	NY	USA	10022	
DIRECTOR	DR MICHAEL A. KEMP		1699 KING STREET, SUITE 404	ENFIELD	CT	USA	06082	
DIRECTOR	DAVID KELLI	ΕR	2101 WEST PEORIA AVENUE SUITE 100PHOENIX		AZ	USA	85029	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE C 195569		Signature: Michelle Donato			Date: 07/17/2015			
		Name (type or print): Michelle Donato			Title: POA			
Processed 07/17/2015		* Electronically provided signatures are accepted as original signatures.						