

No. C 189223		Due no later than Nov 30, 2016		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. AMWINS GROUP BENEFITS, INC. 50 WHITECAP DRIVE NORTH KINGSTOWN RI 02852		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	SCOTT KING	4725 PIEDMONT ROW DR,SUITE 600	CHARLOTTE	NC	USA	28210
SECRETARY	SCOTT M. PURVIANCE	4725 PIEDMONT ROW DR,SUITE 600	CHARLOTTE	NC	USA	28210
TREASURER	SAMUEL H. FLEET	4725 PIEDMONT ROW DR,SUITE 600	CHARLOTTE	NC	USA	28210
DIRECTOR	SCOTT M. PURVIANCE	4725 PIEDMONT ROW DR,SUITE 600	CHARLOTTE	NC	USA	28210
DIRECTOR	MICHAEL STEVEN DECARLO	4725 PIEDMONT ROW DR,SUITE 600	CHARLOTTE	NC	USA	28210
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
RI C 189223		Signature: Kelly Lettmann Name (type or print): Kelly Lettmann			Date: 10/14/2016 Title: POA	
Processed 10/14/2016		* Electronically provided signatures are accepted as original signatures.				