No. C 175094		Due no later than Sep 30, 2016 Annual Report Form		Registered Agent and Address (NO PO BOX) CORPORATION SERVICE COMPANY			
Return to:							
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		12550 W EXPLORER DR STE 100 BOISE ID 83713			
		RISK SPECIALISTS COMPANIES INSURANCE AGENCY, INC. 99 HIGH STREET BOSTON MA 02110					
				3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Na	mes and Busin	ess Addresses of Preside	nt, Secretary, and Directors. Treasurer	(optional).			
Office Held	Office Held Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	JOHN MATHEW ARTESANI		99 HIGH STREET 27TH FLOOR	BOSTON	MA	USA	02110
TREASURER		ME WALLS CAULFIELD	175 WATER STREET 29TH FLOOR	NEW YORK	NY	USA	10038
PRESIDENT JAMES CARL			100 SUMMER STREET	BOSTON	MA	USA	02112
SECRETARY	TANYA E. K	ENI	175 WATER STREET 15TH FLOOR	NEW YORK	NY	USA	10038
5. Organized Under the Laws of:		6. Annual Report must I					
MA C 175094		Signature: TANYA E. KENT		Date: 09/09/2016			
		Name (type or print):	Title: SECRETARY				
Processed 09/09/2016		* Electronically provided signatures are accepted as original signatures.					