

No. W 113566	Due no later than Apr 30, 2018 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. DEPOSIT CHOICE LLC C/O MONICA VOLK RLI INSURANCE 9025 N LINDBERGH DR PEORIA IL 61615 USA		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	TIMOTHY J FORTNER	220 GERRY DRIVE	WOOD DALE	IL	USA	60191
5. Organized Under the Laws of: IL W 113566		6. Annual Report must be signed.* Signature: Timothy J. Fortner Name (type or print): Timothy J. Fortner		Date: 02/27/2018 Title: Manager		
Processed 02/27/2018		* Electronically provided signatures are accepted as original signatures.				