

No. <b>W 144742</b>		Due no later than Nov 30, 2017		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> ASSUREDPARTNERS OF SOUTH CAROLINA, LLC STEVE LAWRENCE ONE FERNANDINA CT COLUMBIA SC 29212		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
MEMBER	ASSUREDPARTNERS NL, LLC	200 COLONIAL CTR PKWY STE 150	LAKE MARY	FL	USA	32746
MANAGER	PAUL VREDENBURG	200 COLONIAL CTR PKWY STE 150	LAKE MARY	FL	USA	32746
MANAGER	THOMAS E RILEY	200 COLONIAL CTR PKWY STE 150	LAKE MARY	FL	USA	32746
MANAGER	JIM W HENDERSON	200 COLONIAL CTR PKWY STE 150	LAKE MARY	FL	USA	32746
MEMBER	ASSURED NEACE L INSURANCE AGENCY, INC.	200 COLONIAL CTR PKWY STE 150	LAKE MARY	FL	USA	32746
5. Organized Under the Laws of: <b>SC</b> <b>W 144742</b>		6. Annual Report must be signed.* Signature: DEAN CURTIS Name (type or print): DEAN CURTIS				
		Date: 10/25/2017 Title: AUTHORIZED SIGNER				
Processed 10/25/2017		* Electronically provided signatures are accepted as original signatures.				