

No. W 36963		Due no later than Feb 28, 2013		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. ASSOCIATED INSURANCE SERVICES LLC JOHN R GRAHAM 3380 W ELDER ST BOISE ID 83705		JOHN R GRAHAM 3380 W ELDER ST BOISE ID 83705			
				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	JOHN R GRAHAM	3380 W ELDER ST	BOISE	ID	USA	83705	
5. Organized Under the Laws of: ID W 36963		6. Annual Report must be signed.* Signature: John R Graham Name (type or print): John R Graham Date: 12/20/2012 Title: Manager					
Processed 12/20/2012		* Electronically provided signatures are accepted as original signatures.					