

No. W 42150		Due no later than Aug 31, 2013 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		1. Mailing Address: Correct in this box if needed. ASPN INSURANCE AGENCY, LLC MICHELLE RICHARDSON PO BOX 81200 CHICAGO IL 60681 USA		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA			
NO FILING FEE IF RECEIVED BY DUE DATE				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	RAM PADMANABHAN	200 E RANDOLPH ST.		CHICAGO	IL	USA	60601
MANAGER	MICHELLE LEY	200 E RANDOLPH ST.		CHICAGO	IL	USA	60601
5. Organized Under the Laws of: DE W 42150		6. Annual Report must be signed.* Signature: Michelle Ley Name (type or print): Michelle Ley Date: 07/15/2013 Title: Asst. Vp					
Processed 07/15/2013 * Electronically provided signatures are accepted as original signatures.							