No. W 117791		Due no later than Oct 31, 2017		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. PROSIGHT SPECIALTY INSURANCE SOLUTIONS, LLC LAUREN CIFRODELLO 412 MT KEMBLE AVE 300C MORRISTOWN NJ 07960		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New 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	5	City	State	Country	Postal Code
MEMBER RIC VICTORES					NJ	USA	07960
MEMBER LARRY HANN		,			NJ	USA	07960
MEMBER ROBERT BAIL					NJ	USA	07960
MEMBER	FRANK PAPA	LIA 412 MT. KEMBLE AVE	ENUE SUITEE 3000	MORRISTOWN	NJ	USA	07960
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
LA W 117791		Signature: FRANK D. PAPALIA D		ate: 10/10/2017			
		Name (type or print): FRANK D. PAPALIA Tit		itle: CHIEF LEGAL OFFICER & SECRETAR			
rocessed 10/10/2017 * Electronically provided signatures are accepted as original signatures.							