

No. W 155925	Due no later than Sep 30, 2016 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. ATLANTIC RECOVERY SOLUTIONS, LLC 275 NORTHPOINTE PKWY STE 60 AMHERST NY 14228-1895 USA		REGISTERED AGENTS INC 1900 NORTHWEST BLVD STE 106A COEUR D ALENE ID 83614			
			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	ZACHARIAH Y AGA	275 NORTHPOINTE PKWY STE 60	AMHERST	NY	USA	14228-1895
5. Organized Under the Laws of: NY W 155925	6. Annual Report must be signed.* Signature: Zachariah Y. Aga Name (type or print): Zachariah Y. Aga		Date: 07/27/2016 Title: President			
Processed 07/27/2016		* Electronically provided signatures are accepted as original signatures.				