No. <b>C 210944</b>		Due	2. Registered Age	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			REGISTERED AGENT SOLUTIONS INC 921 S ORCHARD ST STE G BOISE ID 83705  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  AMERICAN LEASE INSURANCE AGENCY CORPORATION STEVEN E DINKELAKER 654 AMHERST RD SUNDERLAND MA 01375		BOISE ID 83				
NO FILING I RECEIVED BY D	UE DATE							
7000	Names and Busin	ess Addresses of F	President, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	STEVEN E	DINKELAKER	654 AMHERST RD	SUNDERLAND	MA		01375	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
MA C 210944		Signature: Ste		Date: 08/06/2018				
		Name (type or		Title: President				
Processed 08/06/2018	_	* Electronically pr	ovided signatures are accepted as origina	l signatures.		_	_	