

No. W 75078		Due no later than Jun 30, 2012		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. AXIS INSURANCE, LLC TIFFINY SANDQUIST PO BOX 3299 KIRKLAND WA 98083-3299 USA		INCORP SERVICES, INC. 921 S ORCHARD ST STE G BOISE ID 83705 USA 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	CONSTANCE MORROW	PO BOX 2528	TRI CITITES	WA	USA 99302
MEMBER	CONOVER INSURANCE INC	PO BOX 10033	YAKIMA	WA	USA 98909
MEMBER	BDA9	218 MAIN STREET #460	KIRKLAND	WA	USA 98033
MEMBER	CONOVER INSURANCE INC	PO BOX 10088	YAKIMA	WA	USA 98909
MANAGER	BRADLEY D GREEN	PO BOX 3299	KIRKLAND	WA	USA 98083-3299
5. Organized Under the Laws of: WA W 75078		6. Annual Report must be signed.* Signature: Bradley Green Name (type or print): Bradley Green Date: 04/25/2012 Title: Manager			
Processed 04/25/2012		* Electronically provided signatures are accepted as original signatures.			