

No. W 156835		Due no later than Sep 30, 2017 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. CRAWFORD CATASTROPHE SERVICES, LLC R ERIC POWERS III 1001 SUMMIT BLVD ATLANTA GA 30319		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
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 MANAGER	Name R ERIC POWERS III	Street or PO Address 1001 SUMMIT BLVD., NE		City ATLANTA	State GA	Country USA	Postal Code 30319
5. Organized Under the Laws of: DE W 156835		6. Annual Report must be signed.* Signature: R ERIC POWERS III Name (type or print): R ERIC POWERS III Date: 09/11/2017 Title: MANAGER					
Processed 09/11/2017 * Electronically provided signatures are accepted as original signatures.							