

No. W 85351		Due no later than Jul 31, 2013 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. COMMONWEALTH FIDELITY INSURANCE SERVICES, LLC MADELINE LOVEJOY 2510 N. REDHILL AVE. SANTA ANA CA 92705		C T CORPORATION SYSTEM 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	PC AGENT GROUP, INC.	601 RIVERSIDE AVE.	JACKSONVILLE	FL	USA 32204
5. Organized Under the Laws of: DE W 85351		6. Annual Report must be signed.* Signature: Madeline Lovejoy Name (type or print): Madeline Lovejoy Date: 06/11/2013 Title: Assistant Vice President			
Processed 06/11/2013		* Electronically provided signatures are accepted as original signatures.			