No. W 81323		Due no later than Feb 29, 2016		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		AND AND AND ADDRESS OF THE PARTY AND ADDRESS O	C T CORPORATION SYSTEM 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. WRIGHT RISK MANAGEMENT COMPANY, LLC 333 EARLE OVINGTON BLVD. SUITE 505 UNIONDALE NY 11553		BOISE ID 83				
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compani	ies: Enter Naı	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	ANTHONY M	I. GRIPPA	220 S. RIDGEWOOD AVE	DAYTONA BEAC	CH FL	USA	32114	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: Michelle Donato			Date: 01/08/2016			
W 81323		Name (type or print): Michelle Donato			Title: POA			
Processed 01/08/2016 * Electronically provided signatures are accepted as original signatures.								