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|--|----------------------|---|-------------|--|------------------|-------------|--|
| No. W 56138 | | Due no later than Nov 30, 2016 | | 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. PEACHTREE SPECIAL RISK BROKERS, LLC 303 CORPORATE CENTER DRIVE SUITE 300 STOCKBRIDGE GA 30281 | | C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 | | | |
| | | | | 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 | BROWN & BROWN INC. | 655 N FRANKLIN ST., SUITE 1900 | TAMPA | FL | USA | 33602 | |
| MEMBER | ANTHONY T. STRIANESE | 303 CORPORATE CENTER DRIVE SUITE 300 | STOCKBRIDGE | GA | USA | 30281 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| GA W 56138 | | Signature: Kelly Lettmann | | | Date: 10/17/2016 | | |
| | | Name (type or print): Kelly Lettmann | | | Title: POA | | |
| Processed 10/17/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | | |