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| No. W 70269 | Due no later than Jan 31, 2015 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. PUBLIC RISK UNDERWRITERS INSURANCE SERVICES OF TEXAS, LLC SUITE 450 101 W RENNER RD RICHARDSON TX 75082 | | C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE 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 |
| MANAGER | ANTHONY T. STRIANESE | 303 CORPORATE CENTER DRIVE SUITE 300 | STOCKBRIDGE | GA | USA | 30281 |
| 5. Organized Under the Laws of: TX W 70269 | 6. Annual Report must be signed.* Signature: Michelle Donato Name (type or print): Michelle Donato | | Date: 12/11/2014 Title: POA | | | |
| Processed 12/11/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | |