

No. <b>W 115921</b>	<b>Due no later than Jul 31, 2014</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> PROPERTY SOLUTIONS INSURANCE AGENCY, LLC BROCK FAUBUS 2912 EXECUTIVE PARKWAY STE 100 LEHI UT 84043 USA		NATIONAL REGISTERED AGENTS INC 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	
MANAGER	DAVID BATEMAN	2912 EXECUTIVE PARKWAY STE 100	LEHI	UT	USA	84043	
5. Organized Under the Laws of:  <b>UT</b> <b>W 115921</b>	6. Annual Report must be signed.* Signature: David Bateman Name (type or print): David Bateman		Date: 07/17/2014 Title: Manager				
Processed 07/17/2014		* Electronically provided signatures are accepted as original signatures.					