No. <b>W 27891</b>		Due	2. Registered A	2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.		12550 W EX	CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
		ALLIED NORTH AMERICA INSURANCE BROKERAGE OF NEW YORK, LLC BENJAMIN SETTLER 200 E. RANDOLPH ST.						
				3. <u>New</u> Registe	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		CHICAGO IL 6	0601					
4. Limited Liability Compa	ınies: Enter Naı	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MARY MOOR			200 E. RANDOLPH ST.	CHICAGO	IL	USA	60601	
MANAGER	MICHELLE S	. LEY	200 E. RANDOLPH ST.	CHICAGO	IL	USA	60601	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE W 27891		Signature: MICI		Date: 12/08/2016				
		Name (type or p		Title: ASST VP				
Processed 12/08/2016 * Electronically provided signatures are accepted as original signatures.								