

No. <b>W 75078</b>		<b>Due no later than Jun 30, 2016</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  AXIS INSURANCE, LLC ROZEN KING PO BOX 90007 BELLEVUE WA 98004-3299		INCORP SERVICES, INC. 1524 S VISTA AVE STE 12 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
MANAGER	BRADLEY D. GREEN	PO BOX 3299	KIRKLAND	WA	98083-3299
MEMBER	CONSTANCE MORROW	PO BOX 2528	TRI CITITES	WA	USA 99302
MEMBER	CONOVER INSURANCE SERVICES LLC	PO BOX 10033	YAKIMA	WA	USA 98909
MEMBER	BRAVO DELTA RISK, INC	PO BOX 62	MEDINA	WA	USA 98039
5. Organized Under the Laws of:  <b>WA W 75078</b>		6. Annual Report must be signed.* Signature: Bradley Green Name (type or print): Bradley Green  Date: 05/05/2016 Title: Manager			
Processed 05/05/2016		* Electronically provided signatures are accepted as original signatures.			