No. <b>W 134329</b>		Due no later than Feb 28, 2017			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CORPORATE CREATIONS NETWORK IN 950 W BANNOCK ST #1100 BOISE ID 83702				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  PRAXIOM RISK MANAGEMENT, LLC DINDI DEANGELO  123 W BLOOMDALE AVE STE 300						
		BRANDON FL 33511		3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE				,				
4. Limited Liability Con	npanies: Enter Nai	mes and Addresses	s of at least one Member or Manager	r.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER DINDI DEANGEI		GELO	123 WEST BLOOMINDALE AV 300	/E SUITE	BRANDON	FL	USA	33511
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
FL W 134329		Signature: Joyce Bendishaw Date: 01/30/2017						
		Name (type or print): Joyce Bendishaw			Title: Acctg/Finance Mgr			
Processed 01/30/2017	7	* Electronically pr	ovided signatures are accepted as or	riginal sign	atures.			