

No. C 190544	Due no later than Mar 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. CADENCE INSURANCE BROKERS, INC. PAT MCCLUSKEY 2078 SW BALATA TERRACE PALM CITY FL 34990	NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE 83705				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).		3. <u>New</u> Registered Agent Signature:*				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	MICHAEL MCCLUSKEY	6907 UNIVERSITY AVE STE 123	MIDDLETON	WI	USA	53562
5. Organized Under the Laws of: TN C 190544	6. Annual Report must be signed.* Signature: Michael McCluskey Name (type or print): Michael McCluskey		Date: 01/22/2015 Title: President			
Processed 01/22/2015		* Electronically provided signatures are accepted as original signatures.				