

No. W 51544		Due no later than Jun 30, 2016 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		1. Mailing Address: Correct in this box if needed. WSIB INSURANCE AGENCY, LLC 3H CORPORATE SERVICES LLC 6 CLEMENT AVENUE SARATOGA SPRINGS NY 12866		3H AGENT SERVICES INC 1215 W HAYS BOISE ID 83702-2820		
NO FILING FEE IF RECEIVED BY DUE DATE				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 M HATLEM	4401 BARCLAY DOWNS DRIVE SUITE 115	CHARLOTTE	NC	28209	
5. Organized Under the Laws of: IN W 51544		6. Annual Report must be signed.* Signature: David Hatlem Name (type or print): David Hatlem Date: 06/22/2016 Title: Manager				
Processed 06/22/2016 * Electronically provided signatures are accepted as original signatures.						