No. C 185409		Due no later than Dec 31, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. ADJUSTERS MANAGEMENT SERVICES, INC. PHILLIP D JACOBS 4593 W NIEMANN CT. MERIDIAN ID 83646-6069		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				4593 W NIEN MERIDIAN II	PHILLP D JACOBS 4593 W NIEMANN CT. MERIDIAN ID 83646-6069 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busin		USA	f President, Secretary, and Directors. Treasure	or (optional)	ontional			
Office Held	Name	ess Addresses O	Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT	LONNY L HY PHILLIP D J		2880 SW 4TH AVE, SUITE 1 4593 W NIEMANN CT.	ONTARIO MERIDIAN	OR ID	USA USA	97914 83646-6069	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 185409		Signature: P		Date: 10/13/2015				
		Name (type		Title: President				
Processed 10/13/201	5	* Electronically	provided signatures are accepted as original s	ignatures.	· · · · · ·	· · · · · · · · · · · · · · · · · · ·		