2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2017
Secretary of State
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Entity Name: ARTISAN LIFE INSURANCE GROUP LLC

Current Principal Place of Business:

2268 SUNNYSIDE PLACE
SARASOTA, FL 34239

Current Mailing Address:

2268 SUNNYSIDE PLACE
SARASOTA, FL 34239 US

FEI Number: 81-0848018

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PALMER, CRAIG J
2268 SUNNYSIDE PLACE
SARASOTA, FL 34239 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CRAIG J. PALMER 01/08/2017

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	AR
Name	PALMER, CRAIG J
Address	2268 SUNNYSIDE PLACE
City-State-Zip:	SARASOTA FL 34239

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG J. PALMER PRESIDENT 01/08/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date