2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000009098

Entity Name: REVERSE RISK, LLC

_____, ..., , ___

Current Principal Place of Business:

300 BRANNAN ST STE 207 SAN FRANCISCO. CA 94107

Current Mailing Address:

300 BRANNAN ST STE 207 SAN FRANCISCO, CA 94107

FEI Number: 46-2525310 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

FILED Jun 30, 2015

Secretary of State

CC0071818088

Authorized Person(s) Detail:

Title CEO Title CFO

Name SHEETS, FRANK Name ELY, LAURA

Address 300 BRANNAN ST STE 207 Address 300 BRANNAN ST STE 207

City-State-Zip: SAN FRANCISCO CA 94107 City-State-Zip: SAN FRANCISCO CA 94107

Title P

Name SPISAK, DAVID

Address 300 BRANNAN ST STE 207 City-State-Zip: SAN FRANCISCO CA 94107

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: LAURA ELY CFO

Electronic Signature of Signing Authorized Person(s) Detail

06/30/2015 Date