2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

DOCUMENT # M02000000539 03 APR 18 PM 1: 49 1. Entity Name INDEPENDENT INSURANCE AGENCY, SECRETARY OF STATE TALLAHASSEE FLORIDA LLC Principal Place of Business Mailing Address 1 SOUTH WACKERDRIVE, STE 2710 1 SOUTH WACKERDRIVE, STE 2710 CHICAGO, IL 60606 CHICAGO, IL 60606 3. Mailing Address 2. Principal Place of Business 4450 Sojouro Offe Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For FEI Number 36-4485332 Not Applicable 75 \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, by sector printed name of equipped agent and tide if applicable (NOTE: Reustered Agents ignature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS 9. ADDITIONS/CHANGES 10. CR2E083 (10/02 TITLE MGR ☐ Change Addition TITLE CRONIN, W. PERRY NAME NAME 3760 RIVER RUN DRIVE STREET ADDRESS STREET ADDRESS BIRMINGHAM, AL CITY-ST-2IP CITY-ST-21P Delete ☐ Addition TITLE MGR TITLE ☐ Change GONZALES, ARTHUR J NAME NAME 300016233443 STREET ADDRESS 3760 RIVER RUN DRIVE STREET ADDRESS 04/18/03--01015--009 **50.00 BIRMINGHAM, AL CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-21P CITY -ST-ZIP TITLE ☐ Delete 1:11 F ☐ Change Addition | NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CRY-ST-7/P City-St-7iP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the visite empowered to execute this report as required by Chapter 608, Florida Statutes. indicated on this report is true and accurate limited liability company or the receiver or tr

IBER MANAGER OR AUTHORIZED REPRESENTATIVE

Instant Insurance Agency, Inc.

OFFICERS

Title of Officer	Business Address
Chief Executive Officer and	4450 Sojourn Drive, Suite 500
Executive Vice President	Addison, Texas 75001 - 5084 4450 Sojourn Drive, Suite 500 Addison, Texas 75001 - 5084
Executive Vice President	4450 Sojourn Drive, Suite 500 Addison, Texas 75001 - 5084
Chief Financial Officer, Treasurer	4450 Sojourn Drive, Suite 500 Addison, Texas 75001 - 5084
Vice President – Marketing	6640 S. Cicero Ave. Bedford Park, Illinois 60638
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Vice President and Secretary	4450 Sojourn Drive, Suite 500 Addison, Texas 75001 - 5084
	Chief Executive Officer and President Executive Vice President Executive Vice President Chief Financial Officer, Treasurer Vice President – Marketing Vice President - Marketing Vice President - Marketing

DIRECTORS

Directors Name	Directors Business Address
Thomas E. Mangold (Chairman)	4450 Sojourn Drive, Suite 500, Addison, Texas 75001 - 5084
M. Sean McPadden	4450 Sojourn Drive, Suite 500, Addison, Texas 75001 - 5084
Katherine C. Nolan	4450 Sojourn Drive, Suite 500, Addison, Texas 75001 - 5084
Stephen W. Brandt	4450 Sojourn Drive, Suite 500, Addison, Texas 75001 - 5084