M0300001113

(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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LICRETARY OF STATE LAHASSEE, FLORIDA,

APR 0 7 2016

8 MASON

COVER LETTER

	istration Section sion of Corporations			
SUBJECT:	Aon Hewitt Absence Mangeme	ent, LLC		
	Name of Foreign	Limited Liabil	lity Compa	any
Dear Sir or I	Madam:			
The enclose	d application, certificate and fee(s) ar	e submitted fo	or filing.	
Please return	n all correspondence concerning this	matter to the f	ollowing:	
Karen Dea	aly			
	Name of Person			
Reed Grou	p Management LLC			
	Firm/Company			
10355 W	estmoor Drive			
	Address			
Westminst	er, CO 80021			
	City/State and Zip Code			
kdealy@r	reedgroup.com			
E-mail ad	dress: (to be used for future annual re	eport notificati	ion)	
For further i	nformation concerning this matter, pl	lease call:		
Karen Dea	ly	at (<u>303</u>	407-06	88
	Name of Person			e Telephone Number
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations con Building 1 Executive Center Circle ahassee, Florida 32301		Registra Divisior P.O. Bo	NG ADDRESS: ation Section of Corporations ox 6327 ssee, Florida 32314
Enclosed is ■ \$25 Filin	a check for the following amount: g Fee \$30 Filing Fee & Certificate of Status	☐ \$55 Filin Certified	-	\$60 Filing Fee, Certificate of Status & Certified Copy

TO:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	s on the records of the Florida Department of		
State: Aon Hewitt Absence Manag	gement, LLC		
Enter new principal office address, if applicable:	7 Hanayar Sayara		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	New York, NY 10002		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10355 Westmoor Drive Westminster, CO 80021		
2. The Florida document number of this limited lia	ability company is: M0300001113		
J. Hew hame of the innition hability company.	/2003		
	for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The affornate name c." or "LLC.")		
6. If amending the registered agent and/or registere registered agent and/or the new registered office agent	ed officer address on our records, enter the name of the new		
Name of New Registered Agent:			
New Registered Office Address:			
	Bhot I torma breet magess		
	, Florida City Zip Code		
the provisions of all statutes relative to the proper and accept the obligations of my position as regist	gistered Agent: nt and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with ered agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limited		

itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
	See attached		Add
			Remove
····			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
aforemention	certificate, if required: no more than 90 and amendment(s), duly aut rigated by ander the law of which this entity is	y the official having custody of reco	Remove
	•	The authorized representative	OF S
	David T. Roberts		2: 19 STATE LORIG

Filing Fee: \$25.00

REED GROUP MANAGEMENT LLC M03000001113

ATTACHMENT NO. 8 TO AMENDMENT TO CERTIFICATE OF AUTHORITY

AON HEWITT ABSENCE MANAGEMENT, LLC MANAGERS TO BE REMOVED

Type of Action	Name	Title/Capacity	Address
Remove	Christopher Asher	Manager	200 E. Randolph Street Chicago, IL 60606
Remove	Matthew W. Rice	Manager, Secretary, VP	200 E. Randolph Street Chicago, IL 60606
Remove	Michelle S. Ley	AVP, Manager	200 E. Randolph Street Chicago, IL 60606

REED GROUP MANAGEMENT LLC OFFICERS AND MANAGERS

Officers

Type of Action	Name	Title/Capacity	Address
Add	David T. Roberts	Chief Executive Officer	10355 Westmoor Drive Westminster, CO 80021
Add	Stuart J. Shaw	Vice President	7 Hanover Square New York, NY 10002
Add	Roberto C. Ecker	Treasurer	7 Hanover Square New York, NY 10002
Add	Kristina V. Fink	Secretary	7 Hanover Square New York, NY 10002
Add	John A. Dolan	Assistant Secretary	7 Hanover Square New York, NY 10002
Add	Harris Oliner	Assistant Secretary	7 Hanover Square New York, NY 10002

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REED GROUP MANAGEMENT LLC M03000001113

Board of Managers

Type of Action	Name	Title/Capacity	Address
Add	Dong H. Ahn	Board Chair	7 Hanover Square
			New York, NY 10002
Add	John C. Furlong		7 Hanover Square
			New York, NY 10002
Add	Raymond J. Marra		7 Hanover Square
	•		New York, NY 10002
Add	Sean D. Quinn		7 Hanover Square
			New York, NY 10002
Add	David T. Roberts		10355 Westmoor Drive
			Westminster, CO 80021
	Michael Slipowitz		7 Hanover Square
	·		New York, NY 10002

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OFFICE OF THE SECRETARY OF THE STATE

\$55. HARTFORD

I hereby certify that this is a true copy of record in this Office.

SECRETARY OF THE STATE

SECRETARY OF THE STATE OF CONNECTICUT 30 TRINITY STREET P.O. BOX 150470 HARTFORD, CT 06115-0470

01/14/2016

CSC THE UNITED STATES CORPORATION 59 DOGWOOD ROAD WETHERSFIELD, CT 06109

RE: Acceptance of Business Filing THIS IS NOT A BILL

This letter is to confirm the acceptance of the following business filing:

Business Name: Type of Request: REED GROUP MANAGEMENT LLC AMEND NAME

Work Order Number : 2016012224-003 Business Filing Number : 0005464665

Work Order Payment Total : \$330.00 Payment Received : \$170.00

Credit on Account : \$45,023.68

. Business ID : 0756359

If you would like copies of this filing you must complete a Request for Corporate Copies and submit it with the appropriate fee.

STEPHANIE GARY Commercial Recording Division 860-509-6003 www.concord-sots.ct.gov FILING #0005464665 PG 01 OF 05 VOL B-02138 FILED 01/14/2016 01:00 PM PAGE 02676 SECRETARY OF THE STATE CONNECTICUT SECRETARY OF THE STATE

FILING FEE: \$120



SECRETARY OF THE STAT

WARLING ADDRESS: COMMERCIONE RECORDING DATISION, CO.

FILING PARTY (CONFIRMATION VILL BE SENT TO THIS ADDRESS):

DELAKENT ADDRESS, COMMERCIAL RECORDING GRADUM, COMMERCIAL OF SECRETARY OF THE STATE, OF TRUST STREET, MARTECRO OF GRAD PRESENTE: YALLE CONCORD SOIS O'LIGHT

ARTICLES OF AMENDMENT
Limited Liability Company-DOMESTIC

CG 3 6534-109.34-127

USE INK. COMPLETE ALL SECTIONS PRINT OR TYPE, ATTACH EVEX 11 SHEETS IF NECESSARY

		OF THE STATE		
NAME Shawn Lim				
ADDRESS: 919 Third Avenue	j			
CITY: New York				
STATE: NY	ziP,19924			
1. NAME OF LIMITED LIABILITY COS DESIGNATION BUGINS LLC.(LC, EIC.)	APANY - REQUIRED: (MUST MATCH GUR	CHRRENT RECORDS EXACTLY WITH		
Aori Hewitt Absence Management LLC				
2. THE LIMITED LIABILITY COMPAN	Y'S ARTICLE OF ORGANIZATION ARE	(CHECK A, B, C OR D) - REQUIRED:		
A. AMENDED, NAME ONLY:				
(SPE	ECIFY NEW NAME MUST INCLUDE HUSINESS L	DESIGNATION SUCH AS LLC.LLC ETC.)		
T B. AMENDED: ANY AMENDMEN	TS TO THE AFTICLES OF ORGANIZAT	TION,		
A C AMENDED AND PERTATED:	PROVIDE THE TEXT OF EACH AMEND	MENT FOLLOWED BY A COMPLETE		
	ED LIABILITY COMPANY'S ARTICLES			
C D. RESTATED: NTEGRATION OF	ALL PREVIOUS AMENDMENTS TO T	HE ARTICLES OF ORGANIZATION INTO		
ONE DOCUMENT.				
3. FULL TEXT OF EACH AMENDMEN	T / RESTATEMENT - REQUIRED: (NOT	E IF YOU ARE AMENDING THE BUSINESS NAME		
ONLY, COMPLETE SECTION 24 AND YOU MAY				
See attached.				
4 EVECUTION DECIMEES	TO DIVINE THE CONTRACT OF THE CONTRACT OF			
4. EXECUTION - REQUIRED: (SUBJEC				
DATED THIS 13th DAY OF January . 20 16				
NAME OF SIGNATORY (print/type)	CAPACITY/TITLE OF SIGNATORY	SIGNATURE.		
	77777			
STUELT J. Show	Via Risidina	11/ there		
		1/1 200		
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ARTICLES OF AMENDMENT

OF

ARTICLES OF ORGANIZATION

OF

AON HEWITT ABSENCE MANAGEMENT, LLC

AON HEWITT ABSENCE MANAGEMENT, LLC, a Connecticut limited liability company (the "Company") hereby certifies as follows:

- The name of the limited liability company is Aon Hewitt Absence Management, LLC. The date of filing of its original Articles of Organization with the Connecticut Secretary of State was August 4, 2003.
- The Company's sole member duly adopted resolutions proposing to amend and restate the Articles of Organization of the Company.
- Article 1 of the Articles of Organization of the Company is hereby amended to read in its entirety as follows:

"NAME OF THE LIMITED LIABILITY COMPANY: Reed Group Management LLC"

4. Article 2 of the Articles of Organization of the Company is hereby amended to read in its entirety as follows:

"NATURE OF BUSINESS TO BE TRANSACTED OR THE PURPOSES TO BE PROMOTED: To engage in any lawful act or activity for which a limited liability company may be formed under the Connecticut Limited Liability Company Act."

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5. Article 3 of the Articles of Organization of the Company is hereby amended to read in its entirety as follows:

"PRINCIPAL OFFICE ADDRESS: 7 Hanover Square, New York, NY 10002"

6. Article 6 of the Articles of Organization of the Company is hereby amended to read in its entirety as follows:

"MANAGER(S) AND MEMBER(S) INFORMATION:

Name: Reed Acquisitions LLC

Title: Member

Business Address: 7 Hanover Square, New York, NY 10002

Residence Address: 2711 Centerville Road, Suite 400, Wilmington, DE

19808"

- 7. The amended and restated Articles of Organization of the Company are set forth in Exhibit A attached hereto.
- 8. These Articles of Amendment were duly adopted in accordance with the provisions of Section 34-122 Connecticut Limited Liability Company Act.

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2016.

IN WITNESS WHEREOF, the Company has caused these Articles of Amendment to be executed by a duly authorized officer as of this 13th day of January,

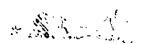
By: NA Man-Name: Study I Surv Title: V. J. Rajakor

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Exhibit A

Amended and Restated Articles of Organization Domestic Limited Liability Company

1. NAME OF THE	AMITED LIABILE	ITY COMPANY:	,,,	
Reed Group Management LLC				
2. NATURE OF BUSINESS TO BE TRANSACTED OR THE PURPOSES TO BE				
PROMOTED:				
To engage in any lawful act or activity for which a limited liability company may be				
formed under the Cor	inecticut Limited Lis	ability Company Act.		
3. PRINCIPAL OF	ICE ADDRESS:			
7 Hanover Square, N	ew York, New York	10002		
4. APPOINTMENT	OF STATUTORY	AGENT FOR SERVICE	E OF PROCESS:	
Name of agent:	Name of agent: Business address (P.O. Box is not			
Corporation Service Company acceptable):				
50 Weston Street				
Hartford, CT 06120-1537				
5. MANAGEMENT				
The management of t	he limited liability c	ompany shall be vested in	one or more	
managers.				
6. MANAGER(S) OR MEMBER(S) INFORMATION				
Name	Title	Business Address Residence Address		
Reed Acquisitions	Member	7 Hanover Square,	2711 Centerville	
LLC New York, NY Road, Suite 400,				
10002 Wilmington, DE				
19808				



Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

REED GROUP MANAGEMENT LLC

a domestic limited liability company, were filed in this office on August 04, 2003.

Articles of amendment for DISABILITY MANAGEMENT ALTERNATIVES, LLC, changing its name to AON HEWITT ABSENCE MANAGEMENT, LLC, were filed on December 08, 2010.

Articles of amendment for AON HEWITT ABSENCE MANAGEMENT, LLC, changing its name to REED GROUP MANAGEMENT LLC, were filed on January 14, 2016.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: February 12, 2016

Business ID: 0756359 Standard Certificate Number: 2016043735001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov