

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000005300

FILED
Jul 10, 2009
Secretary of State

Entity Name: RISK SOLUTIONS INTERNATIONAL LLC

Current Principal Place of Business:

5 PENN PLAZA, SUITE 1404
NEW YORK, NY 10001

New Principal Place of Business:

137 FIFTH AVENUE, 9TH FLOOR
NEW YORK, NY 10010

Current Mailing Address:

5 PENN PLAZA, SUITE 1404
NEW YORK, NY 10001

New Mailing Address:

137 FIFTH AVENUE
9TH FLOOR
NEW YORK, NY 10010

FEI Number: 20-1360505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LOHN, DUANE A
Address: 5 PENN PLAZA, SUITE 1404
City-St-Zip: NEW YORK, NY 10001

Title: MGR () Delete
Name: HIGBEE, PAUL M
Address: 5 PENN PLAZA, SUITE 1404
City-St-Zip: NEW YORK, NY 10001

Title: S () Delete
Name: HIRSCHBERG, MICHAEL
Address: 575 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LOHN, DUANE A
Address: 137 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: MGR (X) Change () Addition
Name: HIGBEE, PAUL M
Address: 137 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: DUANE A. LOHN

EVP

07/10/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date