

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000006822

FILED  
Jan 09, 2008  
Secretary of State

Entity Name: ALLIED RISK SOLUTIONS, LLC

**Current Principal Place of Business:**

390 N BROADWAY  
JERICHO, NY 11753

**New Principal Place of Business:**

**Current Mailing Address:**

390 N BROADWAY  
JERICHO, NY 11753

**New Mailing Address:**

FEI Number: 03-0595846

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: CEO ( ) Delete  
Name: MARINO, WILLIAM A  
Address: 390 N BROADWAY  
City-St-Zip: JERICHO, NY 11753

Title: COO ( ) Delete  
Name: LOMBARDI, HENRY C  
Address: 390 N BROADWAY  
City-St-Zip: JERICHO, NY 11753

Title: CFO ( ) Delete  
Name: MCGANN, PETER M  
Address: 390 N BROADWAY  
City-St-Zip: JERICHO, NY 11753

Title: P ( ) Delete  
Name: GREGORY, LAUREN M  
Address: 390 N BROADWAY  
City-St-Zip: JERICHO, NY 11753

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MARINO, WILLIAM A CEO  
Address: 390 N BROADWAY  
City-St-Zip: JERICHO, NY 11753

Title: MGR (X) Change ( ) Addition  
Name: LOMBARDI, HENRY C COO  
Address: 390 N BROADWAY  
City-St-Zip: JERICHO, NY 11753

Title: MGR (X) Change ( ) Addition  
Name: MCGANN, PETER M CFO  
Address: 390 N BROADWAY  
City-St-Zip: JERICHO, NY 11753

Title: MGR (X) Change ( ) Addition  
Name: GREGORY, LAUREN M PRES.  
Address: 390 N BROADWAY  
City-St-Zip: JERICHO, NY 11753

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: WILLIAM A. MARINO

CEO

01/09/2008

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