



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Limited Liability Company
Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. ID No. 000162393

2. Exact Name of the Limited Liability Company WSIB Insurance Agency, LLC

3. State of Formation

State: IN

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

Non-resident insurance sales & service

5. Principal Office Address

No. and Street: 4401 BARCLAY DOWNS DRIVE
SUITE 115

City or Town: CHARLOTTE State: NC Zip: 28209 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: C/O 3H CORPORATE SERVICES, LLC
6 CLEMENT AVENUE

City or Town: SARATOGA SPRINGS State: NY Zip: 12866 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	DAVID HATLEM	4401 BARCLAY DOWNS DRIVE, SUITE 115 CHARLOTTE, NC 28209 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

UNITED CORPORATE SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI

02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 24 Day of September, 2015 at 2:18:56 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By DAVID HATLEM
Signature of Authorized Person

Form No. 632
Revised 09/07

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