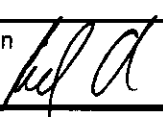




State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2016
Limited Liability Company

- Filing period: September 1 - November 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000535782		2. Exact name of the Limited Liability Company NAESIP LLC	
3. State of Formation NJ		4. Brief description of the character of business conducted in Rhode Island Non-resident insurance sales and service	
5. Principal Office Address 1 International Boulevard, Suite 300		City Mahwah	State NJ
		Zip 07495	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Carl Gerson		Contact Title Secretary	
Street Address 1 International Boulevard, Suite 300		City Mahwah	State NJ
		Zip 07495	
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name Carl Gerson		Manager Name David Quinn	
Street Address 1 International Boulevard, Suite 300		Street Address 1 International Boulevard, Suite 300	
City Mahwah	State NJ	City Mahwah	State NJ
Zip 07495		Zip 07495	
Manager Name Laurence Maier		Manager Name	
Street Address 1 International Boulevard, Suite 300		Street Address	
City Mahwah	State NJ	City	State
Zip 07495		Zip	
Check the box to indicate an attachment ☐			
8. Resident Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 642.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
Name of Authorized Person Carl Gerson		Date 8/16/2016	
Signature of Authorized Person  SIGN DOCUMENT HERE			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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AUG 22 2016
BY 60510