

1.) CORPORATION NAME: Presidio Excess Insurance Services, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street RICHMOND, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY 4.) STATE OR COUNTRY OF INCORPORATION: CA	DUE DATE: 8/31/2015 SCC ID NO: F1559972 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>10,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	10,000
CLASS	AUTHORIZED				
COMMON	10,000				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 199 FREEMONT ST 11TH FLOOR CITY/ST/ZIP: SAN FRANCISCO, CA 94105	
-------------------------------------------------------------------------------------------------------------------------	--

7.) DIRECTORS AND PRINCIPAL OFFICERS:	All directors and principal officers must be listed. An individual may be designated as both a director and an officer.
---------------------------------------	-------------------------------------------------------------------------------------------------------------------------

NAME: DENNIS HEINZIG TITLE: PRESIDENT ADDRESS: 199 FREEMONT ST 11TH FL CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94165	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
-------------------------------------------------------------------------------------------------------------------------	---------------------------------------------	----------------------------------------------	--

NAME: CHRISTOPHER MITCHELL TITLE: TREASURER ADDRESS: 199 FREEMONT ST 11TH FLOOR CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
-------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------	-----------------------------------	--

NAME: RICHARD D. BERVE TITLE: SECRETARY ADDRESS: 199 FREEMONT STREET 11TH FLOOR CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94105	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
-------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------	----------------------------------------------	--

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ RICHARD D. BERVE	RICHARD D. BERVE, SECRETARY	7/23/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.