

1.) CORPORATION NAME: SIG Agency Inc. (USED IN VA BY: STAMFORDINSURANCE GROUP, INC.) 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: EDWARD C TROPE JR 8 CANTERBURY RD RICHMOND, VA 23221 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY 4.) STATE OR COUNTRY OF INCORPORATION: CT	DUE DATE: 12/31/2012 SCC ID NO: F1652959 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </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: 25 Crescent St CITY/ST/ZIP: STAMFORD, CT 06906

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: BRIAN E ROGERS TITLE: PRESIDENT ADDRESS: 22 KNAPP ST CITY/ST/ZIP/CO: STAMFORD, CT 06907	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: JOHN P CODY TITLE: VICE PRESIDENT ADDRESS: 22 KNAPP ST CITY/ST/ZIP/CO: STAMFORD, CT 06907	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ BRIAN E ROGERS	BRIAN E ROGERS, PRESIDENT	12/26/2012
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.