I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

SECRETARY

SIGNATURE: JASON P. HOOD

Electronic Signature of Signing Officer/Director Detail

2ND FLOOR MEMPHIS, TN 38120

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Entity Name: GALAHER SETTLEMENTS AND INSURANCE SERVICES, INC.

Current Mailing Address:

1100 RIDGEWAY LOOP ROAD

DOCUMENT# F0100002505

Current Principal Place of Business:

1100 RIDGEWAY LOOP ROAD 2ND FLOOR MEMPHIS, TN 38120

FEI Number: 36-4268480

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM C/O C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 US

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

Officer/Director Detail :				
Title	PRESIDENT	Title	EVP / CLO / SECRETARY / DIRECTOR	
Name	JOHNSON, ROBERT A.	Name	HOOD, JASON P	
Address	1100 RIDGEWAY LOOP ROAD	Address	1100 RIDGEWAY LOOP ROAD	
City-State-Zip:	MEMPHIS TN 38120	City-State-Zip:	MEMPHIS TN 38120	
Title	EVP / CFO / TREASURER / DIRECTOR			
Name	LYONS, HENRY C.			
Address	1100 RIDGEWAY LOOP ROAD			
City-State-Zip:	MEMPHS TN 38120			

Certificate of Status Desired: No

04/19/2016 Date

Date