The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 **FORM D**

OMB APPROVAL

OMB Number: 3235-0076

Estimated average burden
hours per response: 4.00

Notice of Exempt Offering of Securities

1. Issuer's Identity				
Oll (Files ID November)		Previous	□N	Further True
CIK (Filer ID Number)		Names	None	Entity Type
0001519449		Lightyear Delo	s Acquisition	X Corporation
Name of Issuer		Corp.		Limited Partnership
Houston International Insurance (•			Limited Liability Company
Jurisdiction of Incorporation/O	rganization			General Partnership
TEXAS				Business Trust
Year of Incorporation/Organiza	ation			H
X Over Five Years Ago				Other (Specify)
Within Last Five Years (Sp	ecify Year)			
Yet to Be Formed				
2. Principal Place of Busines	s and Contact Ir	nformation		
Name of Issuer				
Houston International Insurance	Group			
Street Address 1			Street Address 2	
800 GESSNER			SUITE 600	
City	State/Province	ce/Country	ZIP/PostalCode	Phone Number of Issuer
HOUSTON	TEXAS		77024	713-935-4888
3. Related Persons				
Last Name	F	irst Name		Middle Name
Way	S	tephen		L.
Street Address 1	S	treet Address 2		
800 Gessner	S	uite 600		
City	S	tate/Province/Cou	ntry	ZIP/PostalCode
Houston	T	EXAS		77024
Relationship: X Executive Off	ficer X Director	Promoter		
Clarification of Response (if Ne	ecessary):			
Last Name	F	irst Name		Middle Name
Kemp		honda		N.
Street Address 1		treet Address 2		
800 Gessner		uite 600		
City	S	tate/Province/Cou	ntry	ZIP/PostalCode
Houston		EXAS	•	77024
Relationship: X Executive Off	icer Director	Promoter		
Clarification of Response (if Ne	ecessary):			
Last Name	F	irst Name		Middle Name
Sullivan		atrick		
Street Address 1	S	treet Address 2		
800 Gessner		uite 600		
City	S	tate/Province/Cou	ntry	ZIP/PostalCode
Houston		EXAS	•	77024
_	icer X Director			
Clarification of Response (if Ne	ecessary):	_		
Last Name		irst Name		Middle Name
Vassallo		fark		F.
, 4334110	IV	IMIK		**

Street Address 1	Street Address 2		
800 Gessner	Suite 600		
City	State/Province/Country	ZIP/PostalCode	
Houston	TEXAS	77024	
Relationship: Executive Officer X Director	or Promoter		
Clarification of Response (if Necessary):			
Last Name	First Name	Middle Name	
Watson	Mark	E.	
Street Address 1	Street Address 2		
800 Gessner	Suite 600		
City	State/Province/Country	ZIP/PostalCode	
Houston	TEXAS	77024	
Relationship: Executive Officer X Director	or Promoter		
Clarification of Response (if Necessary):			
Last Name	First Name	Middle Name	
Wilburn	Bryan		
Street Address 1	Street Address 2		
800 Gessner	Suite 600	ZID/DoctolCodo	
City Houston	State/Province/Country TEXAS	ZIP/PostalCode 77024	
Relationship: Executive Officer X Director		77024	
	I Fromoter		
Clarification of Response (if Necessary):			
Last Name	First Name	Middle Name	
James	E.	Daniel	
Street Address 1	Street Address 2		
800 Gessner	Suite 600	710/04-10-4-	
City	State/Province/Country TEXAS	ZIP/PostalCode	
Houston		77024	
Relationship: Executive Officer X Director	Promoter Promoter		
Clarification of Response (if Necessary):			
4. Industry Group			
Agriculture	Health Care	Retailing	
Banking & Financial Services	Biotechnology	Retailing	
Commercial Banking		Restaurants	
X Insurance	Health Insurance	Technology	
Investing	Hospitals & Physicians	Computers	
Investment Banking	Pharmaceuticals	Telecommunications	
Pooled Investment Fund			
Is the issuer registered as	Other Health Care	Other Technology	
an investment company under	Manufacturing	Travel	
the Investment Company	Real Estate	Airlines & Airports	
Act of 1940?	Commercial	Lodging & Conventions	
Yes No	Construction	Tourism & Travel Services	
Other Banking & Financial Services	REITS & Finance		
Business Services	□ KEITS & Fillalice	Other Travel	
Energy	Residential	Other	
Coal Mining	Other Real Estate		
Electric Utilities			
Energy Conservation			
Environmental Services			
_			
Oil & Gas			
Oil & Gas Other Energy			

5. Issuer Size

Revenue Range OR	Aggregate Net Asset Value Range
No Revenues	No Aggregate Net Asset Value
\$1 - \$1,000,000	\$1 - \$5,000,000
\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,000,000
Over \$100,000,000	Over \$100,000,000
X Decline to Disclose	Decline to Disclose
Not Applicable	Not Applicable
6. Federal Exemption(s) and Exclu	sion(s) Claimed (select all that apply)
	□
Rule 504(b)(1) (not (i), (ii) or (iii))	Rule 505
Rule 504 (b)(1)(i)	X Rule 506
Rule 504 (b)(1)(ii)	Securities Act Section 4(5)
Rule 504 (b)(1)(iii)	Investment Company Act Section 3(c)
	Section 3(c)(1) Section 3(c)(9)
	Section 3(c)(2) Section 3(c)(10)
	Section 3(c)(3) Section 3(c)(11)
	Section 3(c)(4) Section 3(c)(12)
	Section 3(c)(5) Section 3(c)(13)
	Section 3(c)(6) Section 3(c)(14)
	Section 3(c)(7)
7. Type of Filing	
X New Notice Date of First Sale 2	011-07-26 First Sale Yet to Occur
	711-0/-20 First Sale Tet to Occur
Amendment	
8. Duration of Offering	
Does the Issuer intend this offering to	o last more than one year? Yes No
9. Type(s) of Securities Offered (se	lect all that apply)
- ·	
X Equity	Pooled Investment Fund Interests
Debt	Tenant-in-Common Securities
Option, Warrant or Other Right to	Acquire Another Security
	ercise of Option, Warrant or Other Right Other (describe)
to Acquire Security	
10. Business Combination Transac	tion
Is this offering being made in connect acquisition or exchange offer?	ction with a business combination transaction, such as a merger, Yes X No
Clarification of Response (if Necessa	ry):
11. Minimum Investment	
Minimum investment accepted from	any outside investor \$25,000 USD
12. Sales Compensation	
Recipient	Recipient CRD Number X None
·	
Recipient (Associated) Broker or Dealer X No Street Address 1	
(Associated) Broker or Dealer X No	one (Associated) Broker or Dealer CRD Number X None
(Associated) Broker or Dealer X No. Street Address 1	One (Associated) Broker or Dealer CRD Number X None Street Address 2 State/Province/Country ZIP/Postal Code
(Associated) Broker or Dealer X No Street Address 1 City	One (Associated) Broker or Dealer CRD Number X None Street Address 2 State/Province/Country ZIP/Postal Code t apply)
(Associated) Broker or Dealer X No Street Address 1 City State(s) of Solicitation (select all tha	One (Associated) Broker or Dealer CRD Number X None Street Address 2 State/Province/Country ZIP/Postal Code t apply)
(Associated) Broker or Dealer X No Street Address 1 City State(s) of Solicitation (select all tha Check "All States†or check inc	One (Associated) Broker or Dealer CRD Number X None Street Address 2 State/Province/Country ZIP/Postal Code t apply)

Total Offering Amount USD
Total Amount Sold \$1,525,000 USD

Total Remaining to be Sold USD or X Indefinite
Clarification of Response (if Necessary):
14. Investors
Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering.
Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:
15. Sales Commissions & Finder's Fees Expenses
Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.
Sales Commissions \$0 USD Estimate
Finders' Fees \$0 USD Estimate
Clarification of Response (if Necessary):
16. Use of Proceeds
Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.
\$0 USD Estimate
Clarification of Response (if Necessary):
Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon
 written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Houston International Insurance Group	/s/ Stephen L. Way	Stephen L. Way	Chairman & CEO	2011-08-09

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

^{*} This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.