

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002068

Entity Name: VOYA INSTITUTIONAL PLAN SERVICES, LLC

Current Principal Place of Business:

ONE ORANGE WAY
WINDSOR, CT 06095

Current Mailing Address:

ONE ORANGE WAY
WINDSOR, CT 06095 US

FEI Number: 04-3516284

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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

_____ Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name VOYA RETIREMENT INSURANCE
AND ANNUITY COMPANY
Address ONE ORANGE WAY
City-State-Zip: WINDSOR CT 06095

Title MANAGER
Name BERTUCCI, CARLO
Address ONE ORANGE WAY
City-State-Zip: WINDSOR CT 06095

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TINA SCHULTZ _____

ASSISTANT SECRETARY 03/25/2020

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date