## 2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001260

Entity Name: EQUIFAX INFORMATION SERVICES LLC

**Current Principal Place of Business:** 

1550 PEACHTREE STREET, NW ATLANTA GA 30309

**Current Mailing Address:** 

1550 PEACHTREE STREET, NW ATLANTA GA 30309

FEI Number: 58-2631096 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Mar 23, 2020

**Secretary of State** 

4556199184CC

Authorized Person(s) Detail:

Title MGR, PRESIDENT, SECRETARY Title VICE PRESIDENT AND TREASURER

Name STOCKARD, LISA Name BONFIELD, MICHAEL GABE

Address 1550 PEACHTREE STREET, NW Address 1550 PEACHTREE STREET, NW

City-State-Zip: ATLANTA GA 30309 City-State-Zip: ATLANTA GA 30309

Title VP

Name HORNFECK, TRACI

Address 1550 PEACHTREE STREET, NW

City-State-Zip: ATLANTA GA 30309

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: MICHAEL GABE BONFIELD

**VP AND TREASURER** 

03/23/2020