

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003921

Entity Name: HARRISON & SHRIFTMAN LLC**Current Principal Place of Business:**158 W. 29TH ST
NEW YORK CITY, NY 10001**Current Mailing Address:**200 N. BROADWAY
AAS - TAX, 16TH FL
SAINT LOUIS, MO 63102 US**FEI Number:** 20-0363810**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**Authorized Person(s) Detail :**

Title	MGR
Name	ADAMS, DALE A
Address	158 W. 29TH ST
City-State-Zip:	NEW YORK CITY NY 10001

Title	MGR
Name	GANGI, CRAIG
Address	158 W. 29TH ST
City-State-Zip:	NEW YORK CITY NY 10001

Title	AS
Name	JONES, KATHLEEN M
Address	158 W. 29TH ST
City-State-Zip:	NEW YORK CITY NY 10001

Title	MGR
Name	SHRIFTMAN, LARA
Address	158 W. 29TH ST
City-State-Zip:	NEW YORK CITY NY 10001

Title	MGR
Name	HARRISON, ELIZABETH
Address	158 W. 29TH ST
City-State-Zip:	NEW YORK CITY NY 10001

Title	CFO
Name	RUSSO, PATRICK
Address	158 W. 29TH ST
City-State-Zip:	NEW YORK CITY NY 10001

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: KATHLEEN JONES**ASSISTANT SECRETARY** 04/14/2020_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date