

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000005734

**Entity Name:** ALLSPRING FUNDS DISTRIBUTOR, LLC

**Current Principal Place of Business:**

1415 VANTAGE PARK DRIVE  
3RD FLOOR  
CHARLOTTE, NC 28203

**Current Mailing Address:**

1415 VANTAGE PARK DRIVE  
3RD FLOOR  
CHARLOTTE, NC 28203 US

**FEI Number:** 20-1524639

**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           MANAGER  
Name           KENNEY, JOHN  
Address        1415 VANTAGE PARK DRIVE  
                  3RD FLOOR  
City-State-Zip: CHARLOTTE NC 28203

Title           MANAGER  
Name           MONINGER, JOHN  
Address        1415 VANTAGE PARK DRIVE  
                  3RD FLOOR  
City-State-Zip: CHARLOTTE NC 28203

Title           MANAGER  
Name           MCKINLEY, KATE  
Address        1415 VANTAGE PARK DRIVE  
                  3RD FLOOR  
City-State-Zip: CHARLOTTE NC 28203

*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:** KATE MCKINLEY

**MANAGER**

**02/19/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date