

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000006357

**Entity Name:** USI INSURANCE SERVICES LLC

**Current Principal Place of Business:**

100 SUMMIT LAKE DRIVE, SUITE 400  
VALHALLA, NY 10595

**Current Mailing Address:**

100 SUMMIT LAKE DRIVE, SUITE 400  
VALHALLA, NY 10595 US

**FEI Number:** 13-3771734

**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 MEMBER

Name USI, INC.

Address 100 SUMMIT LAKE DRIVE, SUITE 400

City-State-Zip: VALHALLA NY 10595

Title MANAGER

Name NEWBORN, ERNEST J. II

Address 100 SUMMIT LAKE DRIVE, SUITE 400

City-State-Zip: VALHALLA NY 10595

*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: ERNEST J. NEWBORN II**

**MANAGER**

**03/31/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date