

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000004475

Entity Name: NEXSPRING GROUP, LLC

Current Principal Place of Business:

10805 SUNSET OFFICE SUITE, SUITE 300
ST. LOUIS, MO 63127

Current Mailing Address:

10805 SUNSET OFFICE SUITE, SUITE 300
ST. LOUIS, MO 63127

FEI Number: 20-8034210

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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 THORBERRY, RICHARD G
Address 10805 SUNSET OFFICE SUITE, SUITE 300
City-State-Zip: ST. LOUIS MO 63127

Title MANAGER
Name FABIAN, MICHAEL J.
Address 10805 SUNSET OFFICE SUITE, SUITE 300
City-State-Zip: ST. LOUIS MO 63127

Title MANAGER
Name GARRITY, HELEN B.
Address 10805 SUNSET OFFICE SUITE, SUITE 300
City-State-Zip: ST. LOUIS MO 63127

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 J. FABIAN

MANAGER

02/23/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date