

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000008735

**Entity Name:** EMBROKER INSURANCE SERVICES LLC

**Current Principal Place of Business:**

24 SHOTWELL STREET  
SAN FRANCISCO, CA 94103

**Current Mailing Address:**

24 SHOTWELL STREET  
SAN FRANCISCO, CA 94103 US

**FEI Number:** 47-4825744

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PARACORP INCORPORATED  
155 OFFICE PLAZA DRIVE, 1ST FLOOR  
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 CEO, AUTHORIZED MEMBER  
Name MILLER, MATTHEW COWAN  
Address 24 SHOTWELL STREET  
City-State-Zip: SAN FRANCISCO CA 94103

Title GENERAL COUNSEL; VP  
COMPLIANCE & HR  
Name JOHNSTON, DEANNA L.  
Address 24 SHOTWELL STREET  
City-State-Zip: SAN FRANCISCO CA 94103

*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:** DEANNA L JOHNSTON

GENERAL COUNSEL & VP 04/28/2021  
COMPLIANCE

Electronic Signature of Signing Authorized Person(s) Detail

Date