

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000005630

Entity Name: SELECTQUOTE AUTO & HOME INSURANCE SERVICES, LLC

FILED
Apr 19, 2023
Secretary of State
3512019105CC

Current Principal Place of Business:

6800 W 115TH ST
SUITE 2511
OVERLAND PARK, KS 66211-2205

Current Mailing Address:

6800 W 115TH ST
SUITE 2511
OVERLAND PARK, KS 66211-2205 US

FEI Number: 27-4177177

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST
STE 300 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 SOLE MEMBER
Name SELECTQUOTE, INC.
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name DEVINE, DENISE L
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name HAWKS III, DONALD L
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name DEVANNY III, EARL H
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name PATEL, KAVITA DR.
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name WELDON, RAYMOND F
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name DANKER, TIMOTHY ROBERT
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name GRANT II, WILLIAM THOMAS
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

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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: DANIEL ALLEN BOULWARE

SECRETARY

04/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title PRESIDENT
Name SOUAN, RYAN
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title SECRETARY
Name BOULWARE, DANIEL ALLEN
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title CFO
Name CLEMENT, RYAN MOORE
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title ASSISTANT TREASURER
Name FISHER, STEPHANIE DAWN
Address 6800 W 115TH ST
 SUITE 2511
City-State-Zip: OVERLAND PARK KS 66211-2205