

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M2200000141

**Entity Name:** VOYA INSURANCE SOLUTIONS, LLC

**Current Principal Place of Business:**

ONE ORANGE WAY  
WINDSOR, CT 06095

**Current Mailing Address:**

ONE ORANGE WAY  
WINDSOR, CT 06095 US

**FEI Number: 06-1465377**

**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 MGR  
Name ROBINSON, ANDRE D  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title MGR  
Name HOGENDORN, SHANNON D  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

Title MGR  
Name REILLY, JONATHAN F  
Address 7545 IRVINE CENTER DR., STE. 200  
City-State-Zip: IRVINE CA 92618

Title AUTHORIZED MEMBER  
Name VOYA HOLDINGS INC.  
Address ONE ORANGE WAY  
City-State-Zip: WINDSOR CT 06095

*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: TINA SCHULTZ**

**ASSISTANT SECRETARY 04/05/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date