

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000017209

**Entity Name:** SAMS/HOCKADAY & ASSOCIATES, LLC

**Current Principal Place of Business:**

122 W PRAIRIE AVE  
SUITE 200  
DECATUR, IL 62523

**FILED**  
**Apr 08, 2024**  
**Secretary of State**  
**3834328326CC**

**Current Mailing Address:**

C/O LEGAL DEPT., INTEGRITY MARKETING GROUP, LLC  
1445 ROSS AVENUE, 40TH FLOOR  
DALLAS, TX 75202 US

**FEI Number: 37-1343946**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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	MANAGER, CEO	Title	CO-PRESIDENT
Name	ADAMS, BRYAN W	Name	HOCKADAY , JOHN
Address	C/O LEGAL DEPT., INTEGRITY MARKETING GROUP, LLC 1445 ROSS AVENUE, 40TH FLOOR	Address	C/O LEGAL DEPT., INTEGRITY MARKETING GROUP, LLC 1445 ROSS AVENUE, 40TH FLOOR
City-State-Zip:	DALLAS TX 75202	City-State-Zip:	DALLAS TX 75202
Title	CO-PRESIDENT	Title	ASST. SECRETARY
Name	SAMS , JEFFREY D	Name	MCQUEEN, DUNCAN W
Address	C/O LEGAL DEPT., INTEGRITY MARKETING GROUP, LLC 1445 ROSS AVENUE, 40TH FLOOR	Address	C/O LEGAL DEPT., INTEGRITY MARKETING GROUP, LLC 1445 ROSS AVENUE, 40TH FLOOR
City-State-Zip:	DALLAS TX 75202	City-State-Zip:	DALLAS TX 75202
Title	AUTHORIZED MEMBER		
Name	NEW HORIZONS INSURANCE MARKETING, LLC		
Address	C/O LEGAL DEPT., INTEGRITY MARKETING GROUP, LLC 1445 ROSS AVENUE, 40TH FLOOR		
City-State-Zip:	DALLAS TX 75202		

*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: DUNCAN W MCQUEEN**

**ASST. SECRETARY**

**04/08/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date