

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37142

Entity Name: ASURION CONSUMER SOLUTIONS OF FLORIDA, INC.

Current Principal Place of Business:

300 SOUTH WACKER DRIVE
SUITE 1350
CHICAGO, IL 60606

FILED
Mar 29, 2024
Secretary of State
3107901918CC

Current Mailing Address:

140 11TH AVE N
ATTN: LICENSING DEPT.
NASHVILLE, TN 37203 US

FEI Number: 54-1627746

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Officer/Director Detail :

| | | | |
|-----------------|---|-----------------|---|
| Title | CHAIRMAN | Title | SR. VICE PRESIDENT & CFO |
| Name | TAWEEL, KEVIN | Name | MAGYERA, ANDREA |
| Address | 160 BOVET ROAD STE 402 | Address | 140 11TH AVE N ATTN: LICENSING DEPT. |
| City-State-Zip: | SAN MATEO CA 94402 | City-State-Zip: | NASHVILLE TN 37203 |
| | | | |
| Title | SR. VICE PRESIDENT, GENERAL COUNSEL, & SECRETARY | Title | ASSISTANT SECRETARY |
| Name | PURYEAR, GUSTAVUS IV | Name | GAUL, KRISTEN |
| Address | 140 11TH AVE N ATTN: LICENSING DEPT. | Address | 140 11TH AVE N ATTN: LICENSING DEPT. |
| City-State-Zip: | NASHVILLE TN 37203 | City-State-Zip: | NASHVILLE TN 37203 |
| | | | |
| Title | ASST. TREASURER | Title | VP, ASSISTANT TREASURER |
| Name | EBERSBERGER, HEATHER | Name | JENSON, JASON |
| Address | 140 11TH AVE N ATTN: LICENSING DEPT. | Address | 140 11TH AVE N ATTN: LICENSING DEPT. |
| City-State-Zip: | NASHVILLE TN 37203 | City-State-Zip: | NASHVILLE TN 37203 |
| | | | |
| Title | PRESIDENT | Title | VP & TREASURER |
| Name | STOREY, JOHN | Name | MICHAEL, RATINO |
| Address | 140 11TH AVE N ATTN: LICENSING DEPT. | Address | 160 BOVET RD STE 402 |
| City-State-Zip: | NASHVILLE TN 37203 | City-State-Zip: | SAN MATEO CA 94402 |

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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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN STOREY

PRESIDENT

03/29/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CEO, AND DIRECTOR
Name STADTHAUS, TIMOTHY
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203

Title SENIOR VICE PRESIDENT AND
ASSISTANT TREASURER
Name SANSOM, MICHAEL
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203