

2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000106997

Entity Name: ASSURESIGN, LLC

Current Principal Place of Business:

10800 NE 8TH STREET
SUITE 400
BELLEVUE, WA 98004

Current Mailing Address:

10800 NE 8TH STREET
SUITE 400
BELLEVUE, WA 98004

FEI Number: 26-1816210

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
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: MEREDITH HELLWIG

10/04/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	CEO	Title	CFO
Name	JOHNSON, ERIC	Name	EMANS, ERIC
Address	10800 NE 8TH STREET SUITE 400	Address	10800 NE 8TH STREET SUITE 400
City-State-Zip:	BELLEVUE WA 98004	City-State-Zip:	BELLEVUE WA 98004
Title	SECRETARY		
Name	CHRISTIANSON, JEFFREY		
Address	10800 NE 8TH STREET SUITE 400		
City-State-Zip:	BELLEVUE WA 98004		

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: ERIC EMANS

TAX CONTROLLER

10/04/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date