

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002236

FILED
Jan 23, 2018
Secretary of State
CC0155147167

Entity Name: SOMPO AMERICA INSURANCE SERVICES LLC

Current Principal Place of Business:

11405 N. COMMUNITY HOUSE RD., STE 600
CHARLOTTE, NC 28277

Current Mailing Address:

11405 N. COMMUNITY HOUSE RD., STE 600
CHARLOTTE, NC 28277 US

FEI Number: 51-0448318

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	MGRM	Title	MGR
Name	SOMPO AMERICA INSURANCE COMPANY	Name	JACKSON, H. CLARK
Address	11405 N. COMMUNITY HOUSE RD., STE 600	Address	11405 N. COMMUNITY HOUSE RD., SUITE 600
City-State-Zip:	CHARLOTTE NC 28277	City-State-Zip:	CHARLOTTE NC 28277

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: H. CLARK JACKSON

MANAGER-EVP

01/23/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date