

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000003970

Entity Name: CAPGEMINI BUSINESS SERVICES USA LLC**Current Principal Place of Business:**79 FIFTH AVE, 3RD FLOOR
NEW YORK, NY 10003**Current Mailing Address:**79 FIFTH AVENUE
3RD FLOOR
NEW YORK, NY 10003 US**FEI Number:** 45-2766933**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	CFO	Title	TAX OFFICER
Name	PLESSNER, RICHARD	Name	CALABRESE, CHRIS
Address	79 FIFTH AVENUE 3RD FLOOR	Address	79 FIFTH AVENUE 3RD FLOOR
City-State-Zip:	NEW YORK NY 10003	City-State-Zip:	NEW YORK NY 10003
Title	SECRETARY	Title	MANAGER
Name	CALABRESE, CHRIS	Name	PLESSNER, RICHARD
Address	79 FIFTH AVENUE 3RD FLOOR	Address	79 FIFTH AVENUE 3RD FLOOR
City-State-Zip:	NEW YORK NY 10003	City-State-Zip:	NEW YORK NY 10003
Title	MANAGER	Title	MANAGER
Name	ROBBINS, KAREN	Name	BAILEY, JAMES
Address	333 W WACKER DR 3RD FLOOR	Address	79 FIFTH AVENUE 3RD FLOOR
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	NEW YORK NY 10003
Title	CEO		
Name	ROBBINS, KAREN		
Address	333 W WACKER DR 3RD FLOOR		
City-State-Zip:	CHICAGO FL 60606		

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: CHRIS CALABRESE**SECRETARY****04/05/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date