

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000006727

Entity Name: CORNERSTONE OPERATIONS GROUP LLC**Current Principal Place of Business:**425 NORTH PRINCE STREET
SUITE 101
LANCASTER, PA 17603**Current Mailing Address:**425 NORTH PRINCE STREET
SUITE 101
LANCASTER, PA 17603 US**FEI Number:** 27-4860464**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 MANAGER, CEO
Name KING, JOSEPH
Address 90 NEARWATER LANE
City-State-Zip: DARIEN CT 06820

Title MANAGER, TREASURER
Name DONNELLY, DAVID
Address 425 NORTH PRINCE STREET
SUITE 101
City-State-Zip: LANCASTER PA 17603

Title MEMBER
Name SOUND SHORE HOLDINGS LLC
Address 805 ESTELLE DRIVE
SUITE 209
City-State-Zip: LANCASTER PA 17601

Title PRESIDENT, MANAGER,
AUTHORIZED PERSON
Name WALLACE WEE, KATHY
Address 425 NORTH PRINCE STREET
SUITE 101
City-State-Zip: LANCASTER PA 17603

Title MANAGER, SECRETARY, GENERAL
COUNSEL
Name MOORE, SAMUEL
Address 425 NORTH PRINCE STREET
SUITE 101
City-State-Zip: LANCASTER PA 17603

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: KATHY WALLACE WEE**AUTHORIZED PERSON****04/21/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date