2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 03, 2025
Secretary of State
6280731632CC

DOCUMENT# M13000006081

Entity Name: AFFINITY CONSULTING GROUP, LLC

Current Principal Place of Business:

5666 SEMINOLE BLVD
SUITE 141
SEMINOLE, FL 33772

Current Mailing Address:

5666 SEMINOLE BLVD
SUITE 141
SEMINOLE, FL 33772 US

FEI Number: 27-2534464

Certificate of Status Desired: Yes

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
Name	BEST, STEVEN J
Address	12460 CRABAPPLE ROAD SUITE 202-348
City-State-Zip:	ALPHARETTA GA 30004

Title	MGRM
Name	MELFA, CYNTHIA
Address	5285 WHITTEN DR
City-State-Zip:	NAPLES FL 34104

Title	MGRM
Name	UNGER, PAUL
Address	1550 OLD HENDERSON RD SUITE 150
City-State-Zip:	COLUMBUS OH 43220

Title	PARTNER
Name	WARMAN, RON
Address	45 FERRY LANE
City-State-Zip:	PHOENIXVILLE PA 19460

Title	MGRM
Name	FOSTER, DEBORAH
Address	8200 BRYAN DAIRY ROAD SUITE 160
City-State-Zip:	LARGO FL 33777

Title	MGRM
Name	HENLEY, BARRON
Address	1550 OLD HENDERSON RD SUITE 150
City-State-Zip:	COLUMBUS OH 43220

Title	MGRM
Name	LORISH, BRIGITTE
Address	188 MANASSAS CIRCLE
City-State-Zip:	DALEVILLE VA 24083

Title	PARTNER
Name	STREET, AARON
Address	41 FAREWAY DR
City-State-Zip:	NORTHFIELD MN 55057

Continues on page 2

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: DEBORAH FOSTER CFO 02/03/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date

Authorized Person(s) Detail Continued :

Title	PARTNER
Name	EVERTT, STEPHANIE
Address	1787 NOBLIN SUMMIT CT
City-State-Zip:	DUBLIN GA 30097