2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 19, 2024
Secretary of State
9865699329CC

DOCUMENT# M15000006455

Entity Name: RYZE CLAIM SOLUTIONS LLC

Current Principal Place of Business:

14701 CUMBERLAND ROAD
SUITE 300
NOBLESVILLE, IN 46060

Current Mailing Address:

PO BOX 40878
INDIANAPOLIS, IN 46240 US

FEI Number: 35-2072320

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	Title	MANAGER
Name	ST. JOHN, SCOTT	Name	GRIPPA, ANTHONY "TONY"
Address	14701 CUMBERLAND ROAD SUITE 300	Address	14701 CUMBERLAND ROAD SUITE 300
City-State-Zip:	NOBLESVILLE IN 46060	City-State-Zip:	NOBLESVILLE IN 46060

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: ANTHONY "TONY" GRIPPA MANAGER 02/19/2024

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