2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000006502

Entity Name: PRESCIENT NATIONAL INSURANCE SERVICES, LLC

FILED
Jan 06, 2025
Secretary of State
9213592508CC

Current Principal Place of Business:

217 S.TRYON STREET CHARLOTTE. NC 28202

Current Mailing Address:

PO BOX 32788

CHARLOTTE, NC 28232 US

FEI Number: 04-3718801 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: MCCONNAUGHHAY. JIM 01/06/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title CFO Title TS

NameGRANT, SCOTT HNameGRANT, SCOTT HAddress217 S.TRYON STREETAddress217 S.TRYON STREET

City-State-Zip: CHARLOTTE NC 28202 City-State-Zip: CHARLOTTE NC 28202

Title PRESIDENT

Name FLACHS, BRUCE A

Address 217 S.TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

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: SCOTT GRANT

COMPLIANCE SPECIALIST 01/06/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date