## 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000003907

Entity Name: NSM INSURANCE SERVICES, LLC

**Current Principal Place of Business:** 

555 NORTH LANE

CONSHOHOCKEN, PA 19428

**Current Mailing Address:** 

555 NORTH LANE

CONSHOHOCKEN, PA 19428 US

FEI Number: 83-0348144 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

FILED Feb 27, 2024

**Secretary of State** 

8706151264CC

## Authorized Person(s) Detail:

Title MEMBER

Name RISER TOPCO IV, LLC
Address 555 NORTH LANE

SUITE 6060

City-State-Zip: CONSHOHOCKEN PA 19428

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: JONATHAN COSTELLO

CHIEF FINANCIAL OFFICER

02/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date