

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000009123

Entity Name: MCS INSURANCE SUB PRODUCER SERVICES LLC

Current Principal Place of Business:

1745 SHEA CENTER DRIVE SUITE 200
HIGHLANDS RANCH, CO 80129

Current Mailing Address:

1745 SHEA CENTER DRIVE SUITE 200
HIGHLANDS RANCH, CO 80129 US

FEI Number: 81-4075862

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MBR
Name MANAGEMENT COMPANY SERVICES,
INC.
Address 1745 SHEA CENTER DRIVE SUITE 200
City-State-Zip: HIGHLANDS RANCH CO 80129

Title ASTS
Name SEAVY, BARBARA L
Address 1745 SHEA CENTER DRIVE SUITE 200
City-State-Zip: HIGHLANDS RANCH CO 80129

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: BARBARA L. SEAVY

ASSISTANT SECRETARY 04/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date