2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000004710

Entity Name: ALEXANDER MANN CWS LLC

Current Principal Place of Business:

1301 E. 9TH STREET **SUITE 1200**

CLEVELAND, OH 44114

May 28, 2020 Secretary of State 3008566936CC

FILED

Current Mailing Address:

1301 E. 9TH STREET **SUITE 1200** CLEVELAND, OH 44114 US

FEI Number: NOT APPLICABLE 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title **MANAGER** Title MANAGER

Name BLAIR, ROSALEEN MARY Name WACCHOLZ, MICHAEL S.

Address 1301 E. 9TH STREET Address 1301 E. 9TH STREET **SUITE 1200**

SUITE 1200

CLEVELAND OH 44114 City-State-Zip: City-State-Zip: CLEVELAND OH 44114

Title **MANAGER** MANAGER Title

JONES, MARK ANDREW WHITTAKER, ELIZABETH ANNE Name Name

1301 E. 9TH STREET 1301 E. 9TH STREET Address Address

SUITE 1200 SUITE 1200

CLEVELAND OH 44114 City-State-Zip: CLEVELAND OH 44114 City-State-Zip:

Title MANAGER Title MANAGER

RODGER, MATTHEW CHARLES Name LEACH, STEVEN JOHN Name

1301 E. 9TH STREET 1301 E. 9TH STREET Address Address

SUITE 1200 SUITE 1200

City-State-Zip: CLEVELAND OH 44114 City-State-Zip: CLEVELAND OH 44114

Title **MANAGER** Title **MANAGER**

Name NAIDU, SELVA SUBBUKRISHNAN Name REA, LISA NICOLE

1301 E. 9TH STREET 1301 E. 9TH STREET Address Address

> **SUITE 1200 SUITE 1200**

CLEVELAND OH 44114 City-State-Zip: CLEVELAND OH 44114 City-State-Zip:

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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.

05/28/2020 SIGNATURE: ALEXANDER MANN SOLUTIONS CORPORATION **MEMBER**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title MEMBER

Name ALEXANDER MANN SOLUTIONS CORPORATION

Address ERIEVIEW TOWER 1301 EAST 9TH ST

SUITE 1200

City-State-Zip: CLEVELAND OH 44114