

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000004710

Entity Name: ALEXANDER MANN CWS LLC

Current Principal Place of Business:

1300 E. 9TH STREET
SUITE 400
CLEVELAND, OH 44114

FILED
Apr 15, 2024
Secretary of State
6149496634CC

Current Mailing Address:

1300 E. 9TH STREET
SUITE 400
CLEVELAND, OH 44114 US

FEI Number: 83-4591824

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 MEMBER
Name ALEXANDER MANN SOLUTIONS CORPORATION
Address 1300 E. 9TH STREET SUITE 400
City-State-Zip: CLEVELAND OH 44114

Title MANAGER
Name JONES, MARK ANDREW
Address 1300 E. 9TH STREET SUITE 400
City-State-Zip: CLEVELAND OH 44114

Title MANAGER
Name WHITTAKER, ELIZABETH ANNE
Address 1300 E. 9TH STREET SUITE 400
City-State-Zip: CLEVELAND OH 44114

Title MANAGER
Name RODGER, MATTHEW CHARLES
Address 1300 E. 9TH STREET SUITE 400
City-State-Zip: CLEVELAND OH 44114

Title MANAGER
Name LEIGH, DAVID
Address 1300 E. 9TH STREET SUITE 400
City-State-Zip: CLEVELAND OH 44114

Title MANAGER
Name BROOKS, STEPHEN
Address 1300 E. 9TH STREET SUITE 400
City-State-Zip: CLEVELAND OH 44114

Title MANAGER
Name BULL, GORDON
Address 1300 E. 9TH STREET SUITE 400
City-State-Zip: CLEVELAND OH 44114

Title MANAGER
Name STUART, GORDON
Address 1300 E. 9TH STREET SUITE 400
City-State-Zip: CLEVELAND OH 44114

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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.

SIGNATURE: ALEXANDER MANN SOLUTIONS CORPORATION

MEMBER

04/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MANAGER
Name MURNYACK, ASHLEY
Address 1300 E. 9TH STREET
 SUITE 400
City-State-Zip: CLEVELAND OH 44114