

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000003911

Entity Name: PHRI INSURANCE SERVICES LLC

Current Principal Place of Business:

35 PARKWOOD DR STE 200
HOPKINTON, MA 01748

Current Mailing Address:

35 PARKWOOD DR STE 200
HOPKINTON, MA 01748

FEI Number: 84-2009710

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
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

Authorized Person(s) Detail :

Title MANAGER, PRESIDENT, CEO
Name NOKE, GARY
Address 35 PARKWOOD DR STE 200
City-State-Zip: HOPKINTON MA 01748

Title CFO
Name CHILDRESS, KARA
Address 2600 W. GERONIMO PL. SUITE 100
City-State-Zip: CHANDLER AZ 85224

Title AUTHORIZED MEMBER
Name HUTZENBILER, JJ
Address 2600 W. GERONIMO PL. SUITE 100
City-State-Zip: CHANDLER AZ 85224

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: KARA CHILDRESS

CFO

04/27/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date