

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000005583

Entity Name: INSIGHT GROUP, A CHRISTOPHER COMPANY LLC

Current Principal Place of Business:

3359 MEETING ST STE 101
N CHARLESTON, SC 29405

Current Mailing Address:

3359 MEETING ST STE 101
N CHARLESTON, SC 29405 US

FEI Number: 83-1527397

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4 ST N STE 300
ST PETERSBURG, FL 33702 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 MGR
Name CLEMENTS, MAGGIE
Address 3359 MEETING ST STE 101
City-State-Zip: N CHARLESTON SC 29405

Title MBR
Name CHRISTOPHER, WILLIAM
Address 3359 MEETING ST STE 101
City-State-Zip: N CHARLESTON SC 29405

Title MBR
Name PAGE, KYLIE
Address 3359 MEETING ST STE 101
City-State-Zip: N CHARLESTON SC 29405

Title MBR
Name HATCH, JASON
Address 3359 MEETING ST STE 101
City-State-Zip: N CHARLESTON SC 29405

Title AUTHORIZED MEMBER
Name PARDUE , CHELSEA
Address 3359 MEETING ST STE 101
City-State-Zip: N CHARLESTON SC 29405

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: CHELSEA PARDUE

AR/AP COORDINATOR

01/27/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date