

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000007270

**Entity Name:** NORTHGATEARINSO, LLC

**Current Principal Place of Business:**

8880 FREEDOM CROSSING TRAIL  
SUITE 100  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

8880 FREEDOM CROSSING TRAIL  
SUITE 100  
JACKSONVILLE, FL 32256 US

**FEI Number:** 65-1205969

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
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 AUTHORIZED REPRESENTATIVE  
Name WAHLSTROM, CATHINKA  
Address 8880 FREEDOM CROSSING TRAIL  
SUITE 100  
City-State-Zip: JACKSONVILLE FL 32256

Title AUTHORIZED MEMBER  
Name ALIGHT NGA HOLDINGS LLC  
Address 8880 FREEDOM CROSSING TRAIL  
SUITE 100  
City-State-Zip: JACKSONVILLE FL 32256

Title AUTHORIZED MEMBER  
Name ARINSO LUXEMBOURG SARL  
Address 8880 FREEDOM CROSSING TRAIL  
SUITE 100  
City-State-Zip: JACKSONVILLE FL 32256

*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:** CATHINKA WAHLSTROM

**AUTHORIZED  
REPRESENTATIVE**

**04/28/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date