## 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000013366

Entity Name: CARIBOU INSURANCE SERVICES, LLC

**Current Principal Place of Business:** 

1717 RHODE ISLAND **AVENUE NW SUITE 500** WASHINGTON, DC 20036

## **Current Mailing Address:**

1717 RHODE ISLAND **AVENUE NW SUITE 500** WASHINGTON, DC 20036 US

FEI Number: 87-3003041 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Name

Address

Electronic Signature of Registered Agent

Date

**FILED** Feb 19, 2024

**Secretary of State** 

9252760986CC

## Authorized Person(s) Detail:

MANAGER, AUTHORIZED Title

REPRESENTATIVE

STRADLEY, ERIC

1717 RHODE ISLAND

**AVENUE NW SUITE 500** 

WASHINGTON DC 20036 City-State-Zip:

Title MANAGER

Address

Name GOODALL, SIMON

> 1717 RHODE ISLAND **AVENUE NW SUITE 500**

WASHINGTON DC 20036 City-State-Zip:

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: ERIC STRADLEY

Electronic Signature of Signing Authorized Person(s) Detail

**MANAGER** 

02/19/2024