

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000000350

Entity Name: CIVICAScript, LLC

Current Principal Place of Business:

2912 W EXECUTIVE PKWY STE 300
LEHI, UT 84043

Current Mailing Address:

2912 W EXECUTIVE PKWY STE 300
LEHI, UT 84043 US

FEI Number: 84-4777602

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH ST N STE 300
ST PETERSBURG, FL 33702 US

FILED
Mar 10, 2024
Secretary of State
0437897843CC

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
Name LILJENQUIST, DAN
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name CHITRE, MONA
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name SHAFFER, MATT
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name VAN TOL, TODD
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name SPALDING, JENNIFER
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name NOEL, TIM
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name CLARKE, SANDRA
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name BENNETT, MICHAEL
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

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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: GINA GUINASSO

MANAGER

03/10/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MANAGER
Name GUINASSO, GINA
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name EBERLE, BRENT
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name FIRCH, JILL
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name LYFORD, SHELLEY
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name FITZMAURICE, EAMON
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name GETTINGS, DARREN
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043

Title MANAGER
Name DREDGE, CARTER
Address 2912 W EXECUTIVE PKWY STE 300
City-State-Zip: LEHI UT 84043