

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000002189

Entity Name: COMPARION INSURANCE AGENCY, LLC

Current Principal Place of Business:

175 BERKELEY STREET
BOSTON, MA 02116

Current Mailing Address:

175 BERKELEY STREET
BOSTON, MA 02116

FEI Number: 87-3584108

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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MEMBER	Title	AUTHORIZED REPRESENTATIVE
Name	LIBERTY CORPORATE SERVICES LLC	Name	LYNCH, COLLEEN
Address	175 BERKELEY STREET	Address	175 BERKELEY STREET
City-State-Zip:	BOSTON MA 02116	City-State-Zip:	BOSTON MA 02116

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: COLLEEN LYNCH

**AUTHORIZED
REPRESENTATIVE**

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date