Electronic Signature of Signing Authorized Person(s) Detail

2023 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M22000008499

Entity Name: CPH CONSULTING, LLC

Current Principal Place of Business:

500 W FULTON ST. SANFORD, FL 32771-1220

Current Mailing Address:

500 W FULTON ST. SANFORD, FL 32771-1220 US

FEI Number: 59-2068806

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET 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:

Authorized Person(s) Detail :						
Title	PRESIDENT, CEO, AUTHORIZED	Title	AUTHORIZED MEMBER			
Name	MEMBER SUTCH, PETER-JOHN F	Name	MAHLER, DAVID E			
Address	500 W FULTON ST.	Address	500 W FULTON ST.			
City-State-Zip:		City-State-Zip:	SANFORD FL 32771-1220			
Title	AUTHORIZED MEMBER	Title	ASST. SECRETARY, AUTHORIZED MEMBER			
Name	HENDRIX, TODD H	Name	HUNT, PATRICIA			
Address	500 W FULTON ST.	Address	500 W FULTON ST.			
City-State-Zip:	SANFORD FL 32771-1220	City-State-Zip:	SANFORD FL 32771-1220			
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER			
Name	GIERACH, DAVID	Name	KHOSRAVANI, KAMRAN			
Address	500 W FULTON ST.	Address	500 W FULTON ST.			
City-State-Zip:	SANFORD FL 32771-1220	City-State-Zip:	SANFORD FL 32771-1220			
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER			
Name	SATFIELD, JEFFREY M	Name	SANCHEZ, CARLOS M			
Address	500 W FULTON ST.	Address	500 W FULTON ST.			
City-State-Zip:	SANFORD FL 32771-1220	City-State-Zip:	SANFORD FL 32771-1220			

Continues on page 2

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: PATRICIA HUNT

10/21/2023 ASSISTANT SECRETARY

Date

FILED Oct 21, 2023 Secretary of State 0418330781CC

Certificate of Status Desired: Yes

Date

Title	AUTHORIZED MEMBER
Name	TOOLE, JASON L
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	LUMAN, KURT R
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	CHAIRMAN, AUTHORIZED MEMBER
Name	RENSHAW, MICHAEL
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	BREITENSTEIN, SCOTT A
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	PUGH, GALEN J
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	ROBERTS, RANDALL L
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	BRYANT, JOSHUA A
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	DEWAAL, CHRISTOPHER J
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	MORTON, JEREMY C
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	JAMES, JASON
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	ORTIZ, JOSE

Title	AUTHORIZED MEMBER
Name	JINDAL, NIKHEL
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	GALLOWAY, THOMAS J
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	MORRIS, JAMES R
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	WINTER, JAMES K
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	DALY, AMY E
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	SHERRARD, BROOK K
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	CARPENTER, ALAN R
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	NASSO, ROCCO R
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	LOPEZ, ALBERT
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	SHEFFIELD, KAYLA
Address	500 W FULTON ST.
City-State-Zip:	SANFORD FL 32771-1220
Title	AUTHORIZED MEMBER
Name	MCCANN, KIM
Address	500 W FULTON ST.

Address	500 W FULTON ST.	City-State-Zip:	SANFORD FL 32771-1220
City-State-Zip:	SANFORD FL 32771-1220	Title	TREASURER, AUTHORIZED MEMBER
Title	AUTHORIZED MEMBER	Name	DOSHI, CHARUL
Name	UZUN, ILKER	Address	500 W FULTON ST.
Address	500 W FULTON ST.	City-State-Zip:	SANFORD FL 32771-1220
City-State-Zip:	SANFORD FL 32771-1220		
Title	SECRETARY, AUTHORIZED MEMBER		
Name	STUTZ, JULIA		
Address	500 W FULTON ST.		

City-State-Zip: SANFORD FL 32771-1220