

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000011795

Entity Name: CAPITAL STRATEGIES PRIVATE CLIENT INSURANCE, LLC

Current Principal Place of Business:

850 SHADES CREEK PKWY STE 300
BIRMINGHAM, AL 35209

Current Mailing Address:

850 SHADES CREEK PKWY STE 300
BIRMINGHAM, AL 35209

FEI Number: 87-4636274

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
515 E PARK AVE FL 2
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 MGR
Name GRIFFITH ISRAEL, CHARLES WESLEY
Address 850 SHADES CREEK PKWY STE 300
City-State-Zip: BIRMINGHAM AL 35209

Title MBR
Name CAPITAL STRATEGIES GROUP, INC.
Address 850 SHADES CREEK PKWY STE 300
City-State-Zip: BIRMINGHAM AL 35209

Title MBR
Name PIVOT INSURANCE PARTNERS, LLC
Address 1 OFFICE PARK CIR STE 211
City-State-Zip: BIRMINGHAM AL 35223

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: LYNN SMITH

LICENSING
COORDINATOR

03/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date