

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M23000014563

Entity Name: BOOKING.COM DISTRIBUTION INSURANCE SOLUTIONS, LLC

Current Principal Place of Business:

28 LIBERTY STREET
NEW YORK, NY 10005

Current Mailing Address:

28 LIBERTY STREET
NEW YORK, NY 10005 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 | MANAGER | Title | AUTHORIZED SIGNOR |
| Name | BOOKING.COM DISTRIBUTION BV | Name | TEILING, ANNABEL |
| Address | 28 LIBERTY STREET | Address | 28 LIBERTY STREET |
| City-State-Zip: | NEW YORK NY 10005 | City-State-Zip: | NEW YORK NY 10005 |

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: ANNABEL TEILING

AUTHORIZED SIGNOR

04/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date