# 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HIMES, LESLIE

Electronic Signature of Signing Officer/Director Detail

# Entity Name: AS&G CLAIMS ADMINISTRAGTION, INC. Current Principal Place of Business:

5300 HOLLISTER, SUITE 400 HOUSTON, TX 77040

## **Current Mailing Address:**

5300 HOLLISTER, SUITE 400 HOUSTON, TX 77040

DOCUMENT# F0900003636

### FEI Number: 76-0516648

### Name and Address of Current Registered Agent:

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

LESLIE, HIMES 5724 EAGLE CREEK RD. SARASOTA, FL 34238 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	E LESLIE HIMES			02/20/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	P	Title	V	
Name	DOUGLAS, METZ	Name	DEJAUNE, PHILLIPS	
Address	5300 HOLLISTER, SUITE 400	Address	5300 HOLLISTER, SUITE 400	
City-State-Zip:	HOUSTON TX 77040	City-State-Zip:	HOUSTON TX 77040	
Title	SD	Title	TD	
Name	ABERCROMBIE, MONICA	Name	HIMES, LESLIE	
Address	5300 HOLLISTER, SUITE 400	Address	5300 HOLLISTER, SUITE 400	
City-State-Zip:	HOUSTON TX 77040	City-State-Zip:	HOUSTON TX 77040	
Title	VP			
Name	ABERCROMBIE, JAMES T			
Address	5300 HOLLISTER, SUITE 400			
City-State-Zip:	HOUSTON TX 77040			

TREASURER

02/20/2024

FILED Feb 20, 2024 Secretary of State 9144195431CC

Certificate of Status Desired: Yes

SLIE

icer/Director Detail

Date