RI SOS Filing Number: 202570859600 Date: 4/22/2025 11:28:00 AM

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State of Rhode Island Department of State - Business Services Division

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee If form is not filed by May 31.

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1. Entity ID Number	2. Exact name of the Limited Liability Company							
001727209 -	Catapult Insurance Solutions, LLC							
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island							
524210	Non Resident Insurance Agency							
5. State of Formation								
тх								
6. Principal Office Address		City	State	Zip				
4120 International Parkway, Suite 2000		Carrollton	TX	75007				
7. Mailing Address of Limited Li	7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name	Contact Title							
Timothy A. Sunderman President								
Street Address		City	State	Zip				
4120 International Parkw	ay, Suite 2000	Carrollton	TX	75007				
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.								
9. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.								
Name of Authorized Person			Date	Date				
Grean Hotchkiss				6/18/24				
Signature of Authorized Person Chey Articles								

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

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