

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000009429

**FILED**  
**Jun 12, 2020**  
**Secretary of State**  
**3188862107CC**

**Entity Name:** QMA LLC OF NEW JERSEY

**Current Principal Place of Business:**

TWO GATEWAY CENTER, 100 MULBERRY STREET  
NEWARK, NJ 07102-5096

**Current Mailing Address:**

TWO GATEWAY CENTER, 100 MULBERRY STREET  
NEWARK, NJ 07102-5096 US

**FEI Number:** 33-1077887

**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  
Name           GIBSON, LINDA T  
Address        TWO GATEWAY CENTER, 100  
                  MULBERRY STREET  
City-State-Zip: NEWARK NJ 07102-5096

Title           MANAGER  
Name           DYSON, ANDREW  
Address        2 GATEWAY CENTER  
City-State-Zip: NEWARK NJ 07102

Title           MANAGER  
Name           BRODER, ADAM B  
Address        2 GATEWAY CENTER  
City-State-Zip: NEWARK NJ 07102

Title           MANAGER  
Name           HUNT, DAVID A  
Address        655 BROAD STREET  
City-State-Zip: NEWARK NJ 07102

Title           MANAGER  
Name           HENRIKSSON, ROY D  
Address        2 GATEWAY CENTER  
City-State-Zip: NEWARK NJ 07102

Title           SECRETARY  
Name           PARANGI, MAHSA  
Address        2 GATEWAY CENTER  
City-State-Zip: NEWARK NJ 07102

*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:** MAHSA PARANGI

**SECRETARY**

**06/12/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date