

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000005120

Entity Name: EXCELLA, INC.

Current Principal Place of Business:

2300 WILSON BLVD STE 600
ARLINGTON, VA 22201

Current Mailing Address:

2300 WILSON BLVD STE 600
ARLINGTON, VA 22201

FEI Number: 54-2062249

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 N CALHOUN ST STE 4
TALLAHASSEE, FL 32301 US

FILED
Apr 19, 2023
Secretary of State
5547094622CC

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

Officer/Director Detail :

Title PRESIDENT
Name WHITE, ERNEST BURTON
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201

Title PRESIDENT
Name GALLIMORE, JEFFREY
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201

Title VP
Name MAHSHIE, ZACHARY
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201

Title VP
Name KEZEL, NADINA
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201

Title VP
Name RASHID, MAHREEN
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201

Title DIRECTOR
Name RAO, MOHAN
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201

Title DIRECTOR
Name CHODAKEWITZ, SUSAN
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201

Title DIRECTOR
Name LITTLE, PAMELA
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201

Continues on page 2

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: ZACHARY MAHSHIE

VICE PRESIDENT

04/19/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name GILLESPIE, SANDY
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201

Title DIRECTOR
Name HARDISON, BETH
Address 2300 WILSON BLVD STE 600
City-State-Zip: ARLINGTON VA 22201