F05000002493

(Requestor's Name)
(Address)
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(Cit. (Chan. (Zin (Chan. et))
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUN	IT NO.	: I2	00000001	95			
REFE	ERENCE	: 92	7002	4324392			
AUTHORIZ	CATION	:	19	7			
COST	LIMIT	: \$	3:5% 000 miles	El man			
ORDER DATE : August 9,	2023						
ORDER TIME : 9:25 AM							
ORDER NO. : 927002-023							
CUSTOMER NO: 4324392							
							
CHANGE OF AGENT							
NAME OF DOVE	nn ran			10			
NAME: T. ROWE	PRICE A	ASSOC	TATES, II	NC.			
DIENCE DEMINA MIE POLICI	TNO 30 1	מסמת		J.C.			
PLEASE RETURN THE FOLLOW	ING AS E	PROOF	OF FILL	NG:			
CERTIFIED COPY XX PLAIN STAMPED CO	PY						
CONTACT PERSON: Eyliena	Raker						

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 6 nge is submitted for a corporation r to change its registered office or	organized under the l	aws of the State	of Maryland	
1. The name of t	he corporation: T. ROWE PRICE	ASSOCIATES, INC.			
2. The principal	office address: 100 East Pratt St	reet, Baltimore, MD 2	1202-1009		
3. The mailing a	ddress (if different): 100 East Pr	att Street, Attn: CFA	OM-2170, B	altimore, MD 2	1202-1009
	oration/qualification: 04/25/200		t number: _F05	5000002493	
5. The name and	street address of the current regis tment of State: (If resigned, enter	tered agent and registe	red office on fi	le with the	
	C T Corporation System				
	1200 South Pine Island Road				
	Plantation	F	L 33324	אַרָן. זאַרן (צמצז	
6. The name and (if changed):	street address of the new register Corporation Service Company	ed agent (if changed) a	nd /or registere	SSE SE	per 270.
	1201 Hays Street			E, FLOR	
		P.O. Box NOT acceptable		DRIDA	ي
	Tallahassee	FI	32301	→ > ·	_
	ss of its registered office and the be identical.				agent,
Such change was authorized by th	s authorized by resolution duly a e board, or the corporation has b	idopted by its board of een notified in writing	directors or by of the change	y an officer so	
Xie	. E Gomi	Jill Cilmi, Vic	e President		
	e of an officer or director		nted or typed name		
I further agree to of my duties, and document is being corporation has	the appointment as registered as ocomply with the provisions of a lam familiar with and accept to filed merely to reflect a chang been notified in writing of this a Service-Company	all statutes relative to t he obligation of my po e in the registered offi	the proper and	l complete perior	mance if this aat the
By: Cly	M Ley	08/22/2023	Date		
Signing on bel	witure of Registered Agent nalf of an entity:		, pari,		
Ami M. Casper	Asst. Vice President	-			

* * * FILING FEE: \$35.00 * * *

KS PAYABLE TO FLORIDA DEPARTMENT OF STATE