## AMENDED X MITED LIABILITY COMPANY

UNIFORM, BUSINESS REPORT (UBR) DOCUMENT # 10100021490 DIVISION OF CORPORATIONS 1. Entity Name 02 APR 24 AM 10: 18 **New River Center, LLC** DO NOT WRITE IN THIS SPACE 2. Principal Place of Business ent Parkway 3. Mailing Address SAIVIE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Columbia, MD City & State Applied For 52-1008806 Not Applicable Country Country \$5.00 Additional 21044 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name DO NOT WRITE Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 1<del>201 Hays Street</del> Tallahassee Zip **33260**1 8. 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. 05/02/02--01039--008 FEE IS \$50.00 Make Check Payable to Department of State \*\*\*\*\*50.00 \*\*\*\*\*50.00 DUE BY MAY 1 MANAGING MEMBERS/MANAGERS TITLE MGR NAME NAME Lundquist, Melanie M STREET ADDRESS STREET ADDRESS 10275 Little Patuxent Parkway CITY-ST-ZIP CITY-ST-ZIP Columbia, MD 21044-3456 TITLE MGR TITLE NAME NAME Deering, Anthony W STREET ADDRESS STREET ADDRESS 10275 Little Patuxent Parkway CITY-ST-ZIP COY-ST-ZIP Columbia, MD 21044-3456 MGR TITLE McGregor, Douglas A NAME NAME 10275 Little Patuxent Parkway STREET ADDRESS STREET ADDRESS DO NOT WRITE Columbia, MD 21044-3456 CITY-ST-ZIP CITY-ST-ZIP MGR N THIS SPACE Hullinger, Elizabeth A NAME NAME STREET ADDRESS STREET ADDRESS 10275 Little Patuxent Parkway CITY-ST-ZIP Columbia, MD 21044-3456 MGR TITLE Glenn, Gordon H NAME NAME . STREET ADDRESS STREET ADDRESS 10275 Little Patuxent Parkway CITY-ST-ZIP CITY-ST-ZIP Columbia, MD 21044-3456 MGR TITLE TITLE Donahue, Jeffrey H NAME NAME 10275 Litte Patuxent Parkway STREET ADDRESS

Flizabeth A. Hullinger 4/9/02 410992600

Columbia, MD 21044-3456

CITY-ST-ZIP

STREET ADDRESS

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.