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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 755037 4380061 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE: November 7, 2024 ORDER TIME : 10:17 AM ORDER NO. : 755037-040 CUSTOMER NO: 4380061 CHANGE OF AGENT NAME: SPRINGHILL SMC, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CONTACT PERSON: Amanda Miller

EXAMINER'S INITIALS: _____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

SMC, LLC
7750 Wisconsin Avenue
Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Bethesda, MD 20814
M0700000341
4. Document number
f the Florida Dept. of State:
ALLAHASSEE, FLORIDA
L
aws of the State of Florida, it is hereby confirmed that after the eregistered office and the business office of the registered iability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in elimited liability company. Andrew P.C. Wright, Secretary Printed or typed name of signee aree to act in this capacity. I further agree to comply with the experformance of my duties, and I am familiar with and accept act for in Chapter 605, F.S. Or, if this document is being filed thereby confirm that the limited liability company has been Box 6327• Tallahassee, FL 32314

FILING FEE: \$25.00