2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M9700000140

I. Entity Name

ECKERT SEAMANS CHERIN & MELLOTT, LLC

|--|

FILED May 02, 2003 8:00 am Secretary of State

05-02-2003 90572 010 ****50.00

| Principal Plac | e of Business | Mailing Address | | | | | | |
|---|--|---------------------------------------|--|--|---|---------------|-------------------------------|--|
| 600 GRANT STREET. 44TH FLOOR PITTSBURGH PA 15219-2788 | | | 600 GRANT STREET. 44TH FLOOR PITTSBURGH PA 15219-2788 | | | | | |
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| 2. Principal Place of Business | | 3. Mailing Address | 3. Mailing Address | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | CHECK HERE IF MAKING CHANGES | | | |
| City & State | | City & State | City & State | | 4. FEI Number 25-1056909 | | pplied For of Applicable | |
| Zip | Country | Zip | Country | 5. Certificate of Status D | | 5.00 Add | litional | |
| | 6. Name and Address of Curre | nt Registered Agent | | 7. Name and Address o | f New Registered Ag | gent | | |
| | DODITOL OFFICE COURTS | | Name | | | | | |
| 1201 | RPORATION SERVICE COMPANY I HAYS ST | , | Street Address | | s (P.O. Box Number is Not Acceptable) | | | |
| IALL | LAHASSEE FL 32301 | | | · · · · · · · · · · · · · · · · · · · | | T-2 | | |
| | | | City | | FL | Zip Code | Э | |
| | named entity submits this statement ions of registered agent. | t for the purpose of changing its | s registered office or regis | tered agent, or both, in the Sta | te of Florida. I am fa | miliar with, | and accept | |
| SIGNATURE . | Signature, typed or printed name of registered ag | ent and title if applicable. (NO | TE: Registered Agent signature requ | ired when reinstating) | DATE | | | |
| *** | | | | | | | · | |
| Y | | | IOW!!! FEE IS \$50.00 | | | | 1 | |
| | 905 54 | · · · · · · · · · · · · · · · · · · · | ole to Florida Departm ue By May 1, 2003 | nent of State | | | | |
| -, | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| 9. | | IBERS/MANAGERS | 10. | ADD | ITIONS/CHANGES | | | |
| TITLE STATE | MGRM | ☐ Delete | TITLE | | | ☐ Change | Addition | |
| NAME STREET ADDRESS | TUNGATE, DAVID E | ** - * | NAME CYDEET ADDRESS | | | | | |
| CITY:ST-ZIP | 600 GRANT ST 44TH FLOOR PITTSBURGH PA 15219 | | STREET ADDRESS CITY-ST-ZIP | and the second of the second | er er e - entreparen | | - | |
| : | MGRM | | | 11 AND 12 A A A A A A A A A A A A A A A A A A | | | Addition | |
| TITLE NAME | DELINSKY, STEPHEN R | ☐ Delete | TITLE | | | | Addition | |
| STREET ADDRESS | LUELINGRE STEEREN B | | MARAC | | | ☐ Change | 1 | |
| CITY-ST-ZIP | | | NAME STREET ADDRESS | | | □ Change | | |
| TITLE | ONE INTERNATIONAL PLACE | · | NAME STREET ADDRESS CITY - ST - ZIP | | | □ cuange | | |
| | ONE INTERNATIONAL PLACE BOSTON MA 02110 | | STREET ADDRESS CITY - ST - ZIP | | | | Addition | |
| NAME | ONE INTERNATIONAL PLACE BOSTON MA 02110 MGRM | . Delete | STREET ADDRESS | <u> </u> | | ☐ Change | Addition | |
| į. | ONE INTERNATIONAL PLACE BOSTON MA 02110 MGRM VERALDI, DENNIS L | Delete | STREET ADDRESS CITY-ST-ZIP TITLE | <u>.</u> | | | Addition | |
| NAME STREET ADDRESS | ONE INTERNATIONAL PLACE BOSTON MA 02110 MGRM VERALDI, DENNIS L 600 GRANT STREET, 44TH FL | Delete | STREET ADDRESS CITY-ST-ZIP TITLE NAME | | | | Addition | |
| NAME STREET ADDRESS CITY-ST-ZIP | ONE INTERNATIONAL PLACE BOSTON MA 02110 MGRM VERALDI, DENNIS L 600 GRANT STREET, 44TH FL PITTSBURGH PA 15219-2788 | Delete | STREET ADDRESS CITY-ST-ZIP TITLE NAME 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.

SIGNATURE DOMENDED REQUIRED

4/29/2003

Dat

Daytime Phone #