2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003419

Entity Name: ULLICO SELECT, LLC

Current Principal Place of Business:

8403 COLESVILLE RD SILVER SPRING, MD 20910

Current Mailing Address:

C/O ULLICO INC. LAW DEPARTMENT 1625 EYE STREET NW, FL 5 WASHINGTON, DC 20006 US

FEI Number: 52-1782580

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US FILED Mar 27, 2024 Secretary of State 9092346542CC

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	COLLINS, KEVIN	Name	FRIED, ADAM M.
Address	8403 COLESVILLE RD	Address	8403 COLESVILLE RD
City-State-Zip:	SILVER SPRING MD 20910	City-State-Zip:	SILVER SPRING MD 20910
Title	MANAGER	Title	MANAGER
THE	MANAGER	nuo	NIN NO CERC
Name	HALE, BRIAN J.	Name	WHALEN, STEPHANIE
Address	8403 COLESVILLE RD	Address	8403 COLESVILLE RD
City-State-Zip:	SILVER SPRING MD 20910	City-State-Zip:	SILVER SPRING MD 20910
Title	MANAGER		
Name	HARDY, DARIN R.		
Address	8403 COLESVILLE RD		
City-State-Zip:	SILVER SPRING MD 20910		

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN J. H	IALE
-----------------------	------

MANAGER

03/27/2024

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date