2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000005360

Entity Name: JPMC HERITAGE PARENT LLC

Current Principal Place of Business:

270 PARK AVENUE NEW YORK, NY 10017

Current Mailing Address:

270 PARK AVENUE NEW YORK. NY 10017 US

FEI Number: 27-3449378 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

Date

FILED Apr 13, 2018

Secretary of State

CC0044861322

Authorized Person(s) Detail:

Title ASSISTANT SECRETARY, VP Title MANAGER

Name CASTRO, MARCELA Name GOMEZ-ACEBO, ANA CAPELLA

Address 270 PARK AVENUE Address 270 PARK AVENUE

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

Title MANAGER Title MANAGER

NameLIUZZI, ANGELA MARIENameLIPMAN, JEFFREYAddress270 PARK AVENUEAddress270 PARK AVENUECity-State-Zip:NEW YORK NY 10017City-State-Zip:NEW YORK NY 10017

Title MANAGER Title MANAGER

NameCOREY, JOANNA ISABEL PALACIOSNameBRYAN, KATHRYN LAddress270 PARK AVENUEAddress270 PARK AVENUECity-State-Zip:NEW YORK NY 10017City-State-Zip:NEW YORK NY 10017

Title MANAGER Title MANAGER

NameCASTRO, MARCELANameNOURIE, MARIE AAddress270 PARK AVENUEAddress270 PARK AVENUECity-State-Zip:NEW YORK NY 10017City-State-Zip: NEW YORK NY 10017

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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: MARCELA CASTRO

ASSISTANT SECRETARY, 04/13/2018 VICE PRESIDENT

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title MANAGER Title MANAGER

Name HENNESSY, PAUL C Name SMITH, RICHARD WARREN

Address 270 PARK AVENUE Address 270 PARK AVENUE

City-State-Zip: NEW YORK NY 10017

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