2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1700000066

Entity Name: JPMORGAN CHASE HOLDINGS LLC

Current Principal Place of Business:

383 MADISON AVENUE NEW YORK, NY 10179

Current Mailing Address:

383 MADISON AVENUE NEW YORK, NY 10179 US

FEI Number: 81-3858870

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US 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
Name DAVIS, ALICIA BOLER
Address 383 MADISON AVENUE
City-State-Zip: NEW YORK NY 10179
Title MANAGER
Name BAMMANN, LINDA
Address 383 MADISON AVENUE
City-State-Zip: NEW YORK NY 10179
City-State-Zip: NEW YORK NY 10179
City-State-Zip: NEW YORK NY 10179 Title MANAGER
City-State-Zip: NEW YORK NY 10179 Title MANAGER Name HOBSON, MELLODY
City-State-Zip:NEW YORK NY 10179TitleMANAGERNameHOBSON, MELLODYAddress383 MADISON AVENUE
City-State-Zip:NEW YORK NY 10179TitleMANAGERNameHOBSON, MELLODYAddress383 MADISON AVENUECity-State-Zip:NEW YORK NY 10179
City-State-Zip:NEW YORK NY 10179TitleMANAGERNameHOBSON, MELLODYAddress383 MADISON AVENUECity-State-Zip:NEW YORK NY 10179TitleMANAGER
City-State-Zip:NEW YORK NY 10179TitleMANAGERNameHOBSON, MELLODYAddress383 MADISON AVENUECity-State-Zip:NEW YORK NY 10179TitleMANAGERNameNOVAKOVIC, PHEBE

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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: HORN, RACHEL E.

VP

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 30, 2024 Secretary of State 3406087297CC

Date

Authorized Person(s) Detail Continued :

City-State-Zip: NEW YORK NY 10179

Title	MANAGER	Title	MANAGER
Name	BURKE , STEPHEN B	Name	FLYNN, TIMOTHY
Address	383 MADISON AVENUE	Address	383 MADISON AVENUE
City-State-Zip:	NEW YORK NY 10179	City-State-Zip:	NEW YORK NY 10179
Title	MANAGER	Title	MANAGER
Name	COMBS, TODD A	Name	ROMETTY, VIRGINIA M.
Address	383 MADISON AVENUE	Address	383 MADISON AVENUE
City-State-Zip:	NEW YORK NY 10179	City-State-Zip:	NEW YORK NY 10179
Title	VP		
Name	HORN, RACHEL E.		
Address	383 MADISON AVENUE		