

**2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000007190

**Entity Name:** ORBITAL SCIENCES LLC**Current Principal Place of Business:**2980 FAIRVIEW PARK DR  
FALLS CHURCH, VA 22042**Current Mailing Address:**2980 FAIRVIEW PARK DR  
FALLS CHURCH, VA 22042**FEI Number:** 06-1209561**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
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

**Authorized Person(s) Detail :**

Title MGR  
Name OLSEN, WILLIAM L  
Address 2980 FAIRVIEW PARK DR  
City-State-Zip: FALLS CHURCH VA 22042

Title MGR  
Name RASHID, ADNAN  
Address 2980 FAIRVIEW PARK DR  
City-State-Zip: FALLS CHURCH VA 22042

Title SECRETARY  
Name CHOUNG, SUSIE L  
Address 2980 FAIRVIEW PARK DR  
City-State-Zip: FALLS CHURCH VA 22042

Title ASST. SECRETARY  
Name ANDERSON, BRUCE C.  
Address 2980 FAIRVIEW PARK DR  
City-State-Zip: FALLS CHURCH VA 22042

Title PRESIDENT  
Name DHALLA, CYRUS A.  
Address 2980 FAIRVIEW PARK DR  
City-State-Zip: FALLS CHURCH VA 22042

Title VP  
Name LEHR, SCOTT L.  
Address 2980 FAIRVIEW PARK DR  
City-State-Zip: FALLS CHURCH VA 22042

Title TREASURER  
Name SPIEGEL, STEVEN D  
Address 2980 FAIRVIEW PARK DR  
City-State-Zip: FALLS CHURCH VA 22042

Title ASST. TREASURER  
Name FLAHERTY, JOHN W  
Address 2980 FAIRVIEW PARK DR  
City-State-Zip: FALLS CHURCH VA 22042

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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:** SUSIE L. CHOUNG**SECRETARY****04/30/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title	ASST. SECRETARY
Name	ANDERSON, BRUCE C
Address	2980 FAIRVIEW PARK DR
City-State-Zip:	FALLS CHURCH VA 22042