2023 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M21000016987

Entity Name: SCHELLMAN COMPLIANCE, LLC

Current Principal Place of Business:

4010 W. BOY SCOUT BLVD

SUITE 600

TAMPA, FL 33607

Current Mailing Address:

4010 W. BOY SCOUT BLVD SUITE 600

TAMPA, FL 33607 US

FEI Number: 87-2465686 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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 03, 2023

Secretary of State 6720146837CC

Authorized Person(s) Detail:

Title SOLE MEMBER Title MANAGER

Name SCHELLMAN OPERATIONS, LLC Name DESAI, AVANI M.

Address 9 WEST 57TH STREET Address 4010 W. BOY SCOUT BLVD SUITE 600

City-State-Zip: NEW YORK NY 10019

Title MANAGER Title MANAGER

Name MANIMBO, DANIEL T. Name ZALLER, DEBORAH J.

Address 4010 W. BOY SCOUT BLVD SUITE 600 Address 4010 W. BOY SCOUT BLVD

SUITE 600

City-State-Zip: TAMPA FL 33607

City-State-Zip: TAMPA FL 33607

Title MANAGER

Name KANNEY, DOUGLAS M.

Address 4010 W. BOY SCOUT BLVD Name BARBIN, DOUGLAS W.

SUITE 600 Address 4010 W. BOY SCOUT BLVD

SUITE 600

City-State-Zip: TAMPA FL 33607

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Title MANAGER Title MANAGER

Name NELSON, GARY R. Name MILLER, GREGORY A.

Address 4010 W. BOY SCOUT BLVD SUITE 600 Address 4010 W. BOY SCOUT BLVD

SUITE 600

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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: AVANI M. DESAI MANAGER 04/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title MANAGER Title MANAGER

Name RHOADES, JASON L. Name WILBUR, KRISTEN

Address 4010 W. BOY SCOUT BLVD Address 4010 W. BOY SCOUT BLVD

SUITE 600 SUITE 600

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title MANAGER Title MANAGER

Name WILGUS, MATTHEW P. Name TYLKA, ROBERT C.

Address 4010 W. BOY SCOUT BLVD Address 4010 W. BOY SCOUT BLVD

SUITE 600 SUITE 600

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title MANAGER Title MANAGER

Name BUCKNER, RYAN J. Name MACKIE, RYAN O.

Address 4010 W. BOY SCOUT BLVD Address 4010 W. BOY SCOUT BLVD

SUITE 600 SUITE 600

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title MANAGER Title MANAGER

Name PERRY, SCOTT S. Name HALBROOK, STEPHEN J.

Address 4010 W. BOY SCOUT BLVD Address 4010 W. BOY SCOUT BLVD

SUITE 600 SUITE 600

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