2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000002399

Entity Name: UMI COLLATERAL AGENT LLC

Current Principal Place of Business:

68 S SERVICE RD STE 120 MELVILLE, NY 11747

Current Mailing Address:

68 S SERVICE RD STE 120 MELVILLE, NY 11747 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

COGENCY GLOBAL INC. 115 NORTH CALHOUN ST. STE 4 TALLAHASSEE, FL 32301 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:

City-State-Zip:

Date

Authorized Person(s) Detail :

Title DIRECTOR Title DIRECTOR

BURNS, KEVIN P Name Name ANGELO, BERNARD J

Address 68 S SERVICE RD Address 68 S SERVICE RD

STE 120 **STE 120**

City-State-Zip: MELVILLE NY 11747-2350 City-State-Zip: MELVILLE NY 11747-2350

Title **DIRECTOR** Title INDEPENDENT BOARD MEMBER AND

SPECIAL/SPRINGING MEMBER CORRIGAN, KEVIN J

Name Name SCHONLAND, WAYNE

Address 68 S SERVICE RD 68 S SERVICE RD Address

STE 120 STE 120

MELVILLE NY 11747-2350 City-State-Zip: **MELVILLE NY 117472350**

Title PRESIDENT, TREASURER, ASST. Title VP. ASST. TREASURER AND SECRETARY

SECRETARY Name BURNS, KEVIN P

ANGELO, BERNARD J Name

Address 68 S SERVICE RD Address 68 S SERVICE RD **STE 120**

STE 120 City-State-Zip:

MELVILLE NY 11747-2350 City-State-Zip: MELVILLE NY 11747-2350

Title VP, ASST. TREASURER AND ASST. Title VP, ASST. TREASURER AND ASST. **SECRETARY**

SECRETARY CORRIGAN, KEVIN J

Name Name BISNATH. NIGEL 68 S SERVICE RD Address

68 S SERVICE RD Address **STE 120**

STE 120 City-State-Zip: MELVILLE NY 11747-2350 MELVILLE NY 11747-2350 City-State-Zip:

Continues on page 2

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.

04/13/2023 SIGNATURE: KEVIN P BURNS DIRECTOR

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 13, 2023

Secretary of State

2747817528CC

Authorized Person(s) Detail Continued:

Title VP, ASST. TREASURER AND ASST. SECRETARY

Name O'CONNOR, TIMOTHY

Address 68 S SERVICE RD

STE 120

City-State-Zip: MELVILLE NY 11747-2350

Title VP, ASST. TREASURER AND ASST. SECRETARY

Name PEREZ, DAMIAN A Address 68 S SERVICE RD

STE 120

City-State-Zip: MELVILLE NY 11747-2350

Title VP, ASST. TREASURER AND ASST.

SECRETARY

Name DEANGELIS, DAVE V

Address 68 S SERVICE RD

STE 120

City-State-Zip: MELVILLE NY 11747-2350