

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 857349

**FILED**  
**Apr 13, 2017**  
**Secretary of State**  
**CC3554918290**

**Entity Name:** J.P. MORGAN CHASE NATIONAL CORPORATE SERVICES, INC.

**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:** 13-2781984

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. 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

**Officer/Director Detail :**

Title           VP  
Name           DESOLA, AISLING VERONICA  
Address        270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title           DIRECTOR  
Name           ALIZA F WEIN, ALIZAX F  
Address        270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title           PRESIDENT, DIRECTOR  
Name           JORDAN, KEITH B  
Address        270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title           VP  
Name           CASTRO, MARCELA  
Address        270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title           DIRECTOR, TREASURER  
Name           KELLOGG, TIMOTHY W  
Address        270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AISLING VERONICA DESOLA

**VICE PRESIDENT**

**04/13/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date