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LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M02000003008 03 APR 28 AM 8: 28 1. Entity Name SECRETARY OF STATE TALLAHASSEE FLORIDA CSDV-GP, LLC 000017210000 04/28/03--01105--005 **50.00 MJH 2. Principal Place of Euginess Teachers' c/Mtarfformia State Teachers Retirement System Retirement System Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 7667 Folsom Boulevard, MSO4 7667 Folsom Boulevard, MSO4 City & State Sacramento, CA City & State Sacramento, CA . FEI Number Applied For 48-1295939 Not Applicable Zlp Country \$5.00 Additional Country 5. Certificate of Status Desired П 95826 95826 Fee Required 7. Name and Address of Current Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Zip Code 33324 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable 9. MANAGING MEMBERS/MANAGERS TITLE MGRM California State Teachers' Retirement System NAME 7667 Folsom Boulevard, MSO4 STREET ADDRESS Sacramento, CA 95826 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes. Christopher J. Ailman SIGNATURE

FRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE STMENT OFFICE TO DOYSTIN PROTES