11. I hereby certify that the information supplied with this filing 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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

MAME

SIGNATURE:

MGR

STREET ADDRESS

CITY ST'ZIP

NAME ...

CITY- 21- ZIP

STREET ADDRESS

TITLE

ONE MARRIOTT DRIVE

ONE MARRIOTT DRIVE WASHINGTON DC 10058

PULSE, M. L JR.

WASHINGTON DC 10058

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

☐ Delete



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Addition

POPUS PROJECT