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: WILLIAM I. SANDERSON

Electronic Signature of Signing Authorized Person(s) Detail

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title ADMINISTRATIVE MANAGER Name SANDERSON, WILLIAM I MCGUIRE WOODS LLP, 2001 K Address STREET NW, SUITE 400 City-State-Zip: WASHINGTON DC 20006-1040

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:

Current Principal Place of Business:

C/O WILLIAM I. SANDERSON/ MCGUIRE WOODS LLP 2001 K STREET NW, SUITE 400 WASHINGTON, DC 20006-1040

Entity Name: 1000 OCEAN DRIVE U1 LLC

Current Mailing Address:

DOCUMENT# L15000075703

C/O DENNIS I BELCHER/ MCGUIRE WOODS LLP ONE JAMES CENTER, 901 E CARY ST. RICHMOND, VA 23219-4030

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

RAX CO. 50 NORTH LAURA ST. **SUITE 3300** JACKSONVILLE, FL 32202 US

ADMINISTRATIVE

MANAGER

Certificate of Status Desired: No

Date

Date

04/16/2018

FILED Apr 16, 2018 Secretary of State CC6214468861

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT