## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L17000142101

#### Entity Name: SANTA CLARA MM LLC

# Current Principal Place of Business:

401 WILSHIRE BLVD. SUITE 1070 SANTA MONICA, CA 90401

# **Current Mailing Address:**

401 WILSHIRE BLVD. SUITE 1070 SANTA MONICA, CA 90401 US

# FEI Number: APPLIED FOR

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

Certificate of Status Desired: No

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

# Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	BRONFMAN, JEREMY S.	Name	GRUSKIN, JONATHAN A.
Address	201 SANTA MONICA BLVD SUITE 550	Address	595 MADISON AVE 46TH FLOOR
City-State-Zip:	SANTA MONICA CA 90401	City-State-Zip:	NEW YORK NY 10022
Title	AUTHORIZED PERSON		
Name	CONGER, TYLER		
Address	401 WILSHIRE BLVD. SUITE 1070		
City-State-Zip:	SANTA MONICA CA 90401		

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: TYLER CONGER

AUTHORIZED PERSON 06/16/2020

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jun 16, 2020 Secretary of State 4032505188CC

Date

Date