

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001534

Entity Name: DOMINION REALTY, LLC**Current Principal Place of Business:**C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
AVENTURA, FL 33160**Current Mailing Address:**C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
AVENTURA, FL 33160 US**FEI Number:** 65-0633925**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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

Authorized Person(s) Detail :

Title MEMBER
Name TRUMP HOLDINGS, LLC
Address C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
City-State-Zip: AVENTURA FL 33160

Title CO-CHAIRMAN, MEMBER
Name TRUMP, JULIUS
Address C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
City-State-Zip: AVENTURA FL 33160

Title CO-CHAIRMAN, MEMBER
Name TRUMP, EDDIE
Address C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
City-State-Zip: AVENTURA FL 33160

Title SENIOR VICE PRESIDENT
Name TODES, MARK
Address C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
City-State-Zip: AVENTURA FL 33160

Title EXECUTIVE VICE PRESIDENT
Name LIEB, JAMES M
Address C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
City-State-Zip: AVENTURA FL 33160

Title EXECUTIVE VICE PRESIDENT
Name HIRSCH, MARK S
Address C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
City-State-Zip: AVENTURA FL 33160

Title ASST VICE PRESIDENT
Name TORPEY, CARITE L
Address C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
City-State-Zip: AVENTURA FL 33160

Title MANAGER
Name TH CO MANAGEMENT, INC
Address C/O TRUMP HOLDINGS, LLC
4000 ISLAND BLVD. PH-2
City-State-Zip: AVENTURA FL 33160

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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: CARITE L TORPEY

AVP

04/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	SVP, MGRD
Name	TRUMP, JOSHUA
Address	C/O TRUMP HOLDINGS, LLC 4000 ISLAND BLVD. PH-2
City-State-Zip:	AVENTURA FL 33160