

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001534

Entity Name: DOMINION REALTY, LLC

Current Principal Place of Business:

C/O TRUMP HOLDINGS, LLC
17895 COLLINS AVE.
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

C/O TRUMP HOLDINGS, LLC
17895 COLLINS AVE.
SUNNY ISLES BEACH, 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
17895 COLLINS AVE.
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title CO-CHAIRMAN, MEMBER
Name TRUMP, JULIUS
Address C/O TRUMP HOLDINGS, LLC
17895 COLLINS AVE.
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title CO-CHAIRMAN, MEMBER
Name TRUMP, EDDIE
Address C/O TRUMP HOLDINGS, LLC
17895 COLLINS AVE.
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title SENIOR VICE PRESIDENT
Name TODES, MARK
Address C/O TRUMP HOLDINGS, LLC
17895 COLLINS AVE.
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title EXECUTIVE VICE PRESIDENT
Name LIEB, JAMES M
Address C/O TRUMP HOLDINGS, LLC
17895 COLLINS AVE.
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title EXECUTIVE VICE PRESIDENT
Name HIRSCH, MARK S
Address C/O TRUMP HOLDINGS, LLC
17895 COLLINS AVE.
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title ASST VICE PRESIDENT
Name TORPEY, CARITE L
Address C/O TRUMP HOLDINGS, LLC
17895 COLLINS AVE.
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MANAGER
Name T2 COS MANAGEMENT, INC
Address C/O TRUMP HOLDINGS, LLC
17895 COLLINS AVE.
City-State-Zip: SUNNY ISLES BEACH 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

04/27/2017

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
17895 COLLINS AVE.
City-State-Zip: SUNNY ISLES BEACH FL 33160