#### **2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M03000000920

Entity Name: PHILLIPS EDISON & COMPANY LTD., LLC

**Current Principal Place of Business:** 

11501 NORTHLAKE DRIVE CINCINNATI, OH 45249

# **Current Mailing Address:**

11501 NORTHLAKE DRIVE CINCINNATI. OH 45249 US

FEI Number: 31-1669229 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

**FILED** May 23, 2020

**Secretary of State** 

9678969259CC

#### Authorized Person(s) Detail :

Title	SR. VICE PRESIDENT	Title	SR. VICE PRESIDENT
Name	ROBISON, JENNIFER	Name	MYERS, ROBERT F.
Address	11501 NORTHLAKE DRIVE	Address	11501 NORTHLAKE DRIVE
City-State-Zip:	CINCINNATI OH 45249	City-State-Zip:	CINCINNATI OH 45249

Title SR. VICE PRESIDENT Title SR. VICE PRESIDENT Name MURPHY, DEVIN I. Name CAULFIELD, JOHN

Address 10 ROCKEFELLER PLAZA Address 11501 NORTHLAKE DRIVE NEW YORK NY 10020 City-State-Zip: City-State-Zip: CINCINNATI OH 45249

ASSISTANT TREASURER Title SR. VICE PRESIDENT Title

Name CAULFIELD, JOHN SCHLOSSER, JOE Name

Address 11501 NORTHLAKE DRIVE Address 11501 NORTHLAKE DRIVE

City-State-Zip: CINCINNATI OH 45249 CINCINNATI OH 45249 City-State-Zip:

Title **PRESIDENT** Title ASSISTANT SECRETARY

EDISON, JEFFREY S. Name MYERS, ROBERT F. Name

11501 NORTHLAKE DRIVE Address 11501 NORTHLAKE DRIVE Address City-State-Zip: CINCINNATI OH 45249 CINCINNATI OH 45249 City-State-Zip:

Continues on page 2

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: ROBERT F. MYERS

CHIEF OPERATING **OFFICER** 

05/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

## Authorized Person(s) Detail Continued:

Title CEO

Address

Name EDISON, JEFFREY S.

Address 11501 NORTHLAKE DRIVE

City-State-Zip: CINCINNATI OH 45249

Title SR. VICE PRESIDENT

Name BRADY, TANYA E.

City-State-Zip: CINCINNATI OH 45249

11501 NORTHLAKE DRIVE

,

Title TREASURER

Name MURPHY, DEVIN I.

Address 10 ROCKEFELLER PLAZA

City-State-Zip: NEW YORK NY 10020

Title COO

Name MYERS, ROBERT F.

Address 11501 NORTHLAKE DRIVE

City-State-Zip: CINCINNATI OH 45249

Title SECRETARY
Name BRADY, TANYA E.

Address 11501 NORTHI AKE DRI

Address 11501 NORTHLAKE DRIVE City-State-Zip: CINCINNATI OH 45249

Title CHIEF ACCOUNTING OFFICER

Name ROBISON, JENNIFER

Address 11501 NORTHLAKE DRIVE City-State-Zip: CINCINNATI OH 45249

Title CFO

Name MURPHY, DEVIN I.

Address 10 ROCKEFELLER PLAZA City-State-Zip: NEW YORK NY 10020