

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001403

Entity Name: EL-AD CAMINO REAL LLC**Current Principal Place of Business:**1000 S. PINE ISLAND ROAD SUITE # 450
PLANTATION, FL 33324**Current Mailing Address:**1000 S. PINE ISLAND ROAD SUITE # 450
PLANTATION, FL 33324**FEI Number:** 20-4416724**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC
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

Authorized Person(s) Detail :

Title MGR, CHAIRMAN
Name DANIELL, ORLY
Address 575 MADISON AVENUE 22ND FL
City-State-Zip: NEW YORK NY 10022

Title INDP MGR, SPRINGING MEMBER
Name ZIMMER, STEVEN P
Address 1209 ORANGE STREET
City-State-Zip: WILMINGTON DE 19801

Title SECRETARY
Name MOHAR, ARAVA
Address 1000 S. PINE ISLAND ROAD SUITE # 450
City-State-Zip: PLANTATION FL 33324

Title MGR, CFO, VP
Name BRONFMAN, ARIK
Address 1000 S. PINE ISLAND ROAD SUITE # 450
City-State-Zip: PLANTATION FL 33324

Title INDP MGR, SPRINGING MEMBER
Name DIAMOND, WILLIAM C
Address 1209 ORANGE STREET
City-State-Zip: WILMINGTON DE 19801

Title MBR
Name EL-AD GB MEZZANINE 1 LLC
Address 1301 INTERNATIONAL PARKWAY 200
City-State-Zip: SUNRISE FL 33323

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: ARIK BRONFMAN**CFO****01/25/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date