

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000004060

Entity Name: RT NORTHPOINT III, LLC

Current Principal Place of Business:

90 PARK AVENUE
32ND FLOOR
NEW YORK, NY 10016

FILED
Apr 11, 2017
Secretary of State
CC9334002480

Current Mailing Address:

90 PARK AVENUE
32ND FLOOR
NEW YORK, NY 10016 US

FEI Number: 26-2519690

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MANAGER, CEO
Name DUGAN, GORDON F
Address 90 PARK AVENUE
 32ND FLOOR
City-State-Zip: NEW YORK NY 10016

Title MANAGER, PRESIDENT
Name HARRIS, BENJAMIN P
Address 90 PARK AVENUE
 32ND FLOOR
City-State-Zip: NEW YORK NY 10016

Title MANAGER, CFO, TREASURER
Name CLARK, JON W
Address 90 PARK AVENUE
 32ND FLOOR
City-State-Zip: NEW YORK NY 10016

Title GENERAL COUNSEL, MANAGER, VP
Name MATEY JR., EDWARD J
Address 90 PARK AVENUE
 32ND FLOOR
City-State-Zip: NEW YORK NY 10016

Title MANAGER, MANAGING DIRECTOR,
 VP
Name ROTHSCHILD, ALLAN B
Address 90 PARK AVENUE
 32ND FLOOR
City-State-Zip: NEW YORK NY 10016

Title MANAGER, MANAGING DIRECTOR,
 VP
Name TUBESING, PETER M
Address 90 PARK AVENUE
 32ND FLOOR
City-State-Zip: NEW YORK NY 10016

Title MANAGER, MANAGING DIRECTOR,
 VP
Name PELL, NICHOLAS L
Address 90 PARK AVENUE
 32ND FLOOR
City-State-Zip: NEW YORK NY 10016

Title MANAGER, MANAGING DIRECTOR,
 VP
Name HUFFMAN, SONYA A
Address 90 PARK AVENUE
 32ND FLOOR
City-State-Zip: NEW YORK NY 10016

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: JON W. CLARK

TREASURER

04/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date