

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000002864

Entity Name: SAWGRASS VILLAGE SHOPPING CENTER LLC

Current Principal Place of Business:

ONE FINANCIAL PLAZA
HARTFORD, CT 06103

Current Mailing Address:

ONE FINANCIAL PLAZA
HARTFORD, CT 06103 US

FEI Number: NOT APPLICABLE

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 MANAGING MEMBER
Name MASSACHUSETTS MUTUAL LIFE
 INSURANCE COMPANY
Address ONE FINANCIAL PLAZA
City-State-Zip: HARTFORD CT 06103

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: JOHN KENNEDY

AUTHORIZED PERSON

05/02/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date