## **2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000000078

Entity Name: BHH AFFILIATES, LLC

**Current Principal Place of Business:** 

18500 VON KARMAN AVENUE

SUITE 400

IRVINE, CA 92612

**Current Mailing Address:** 

ATTN: LEGAL DEPARTMENT

333 SOUTH 7TH STREET 27TH FLOOR

MINNEAPOLIS, MN 55402 US

FEI Number: 80-0906383 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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** Apr 15, 2019

**Secretary of State** 

4799529306CC

Authorized Person(s) Detail:

Title **MGRM** Title

HSF AFFILIATES LLC BROWNE, MICHAEL T. Name Name

Address 18500 VON KARMAN AVENUE Address 333 SOUTH SEVENTH STREET

> SUITE 400 2700

MINNEAPOLIS MN 55402 IRVINE CA 92612 City-State-Zip: City-State-Zip:

Title **PRESIDENT** 

STUART, CHRISTOPHER Name

18500 VON KARMAN AVENUE, SUITE Address

IRVINE CA 92612 City-State-Zip:

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: MICHAEL T. BROWNE

Electronic Signature of Signing Authorized Person(s) Detail

**SECRETARY** 

**SECRETARY** 

04/15/2019