

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1400001526

Entity Name: CREA 330 THIRD LLC

Current Principal Place of Business:

C/O BARRINGS LLC
ONE FINANCIAL PLAZA
HARTFORD, CT 06103

FILED
Jan 21, 2019
Secretary of State
1607930571CC

Current Mailing Address:

C/O BARRINGS LLC
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: SUSAN ENSTROM

01/21/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | | | |
|-----------------|--|-----------------|---|
| Title | MANAGING MEMBER | Title | AUTHORIZED REPRESENTATIVE |
| Name | MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY | Name | KINNON, KELLY |
| Address | C/O BARRINGS LLC ONE FINANCIAL PLAZA | Address | C/O BARRINGS LLC ONE FINANCIAL PLAZA |
| City-State-Zip: | HARTFORD CT 06103 | 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: KELLY KINNON

AUTHORIZED PERSON

01/21/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date