2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000002754

Entity Name: BROADWAY PROMENADE STATION LLC

Current Principal Place of Business:

11501 NORTHLAKE DRIVE CINCINNATI. OH 45249

Current Mailing Address:

11501 NORTHLAKE DRIVE CINCINNATI, OH 45249 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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 May 23, 2020

Secretary of State

2170689579CC

Authorized Person(s) Detail:

Title ASSISTANT TREASURER Title VP

Name CAULFIELD, JOHN Name CAULFIELD, JOHN

Address 11501 NORTHLAKE DRIVE Address 11501 NORTHLAKE DRIVE
City-State-Zip: CINCINNATI OH 45249 City-State-Zip: CINCINNATI OH 45249

TitleASSISTANT SECRETARYTitleSECRETARYNameMYERS, ROBERT F.NameBRADY, TANYA E.

Address 11501 NORTHLAKE DRIVE Address 11501 NORTHLAKE DRIVE

City-State-Zip: CINCINNATI OH 45249 City-State-Zip: CINCINNATI OH 45249

Title VP Title PRESIDENT

NameROBISON, JENNIFERNameEDISON, JEFFREY S.Address149 RAMSEY CTAddress11501 NORTHLAKE DRIVE

City-State-Zip: LOVELAND OH 45140 City-State-Zip: CINCINNATI OH 45249

Title CEO Title VP

Name EDISON, JEFFREY S. Name BRADY, TANYA E.

Address 11501 NORTHLAKE DRIVE Address 11501 NORTHLAKE DRIVE
City-State-Zip: CINCINNATI OH 45249 City-State-Zip: CINCINNATI OH 45249

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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: JOE SCHLOSSER VICE PRESIDENT 05/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title VP Title VP

Name MYERS, ROBERT F. Name MURPHY, DEVIN I.

Address 11501 NORTHLAKE DRIVE Address 10 ROCKEFELLER PLAZA
City-State-Zip: CINCINNATI OH 45249 City-State-Zip: NEW YORK NY 10020

Title VP Title TREASURER

Name SCHLOSSER, JOE Name MURPHY, DEVIN I.

Address 11501 NORTHLAKE DRIVE Address 10 ROCKEFELLER PLAZA
City-State-Zip: CINCINNATI OH 45249 City-State-Zip: NEW YORK NY 10020