2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2021
Secretary of State
0721472428CC

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Entity Name: BSREP II WS PENSACOLA NORTHEAST LLC

Current Principal Place of Business:

8919 W. 21ST STREET NORTH
SUITE 200, #316
WICHITA, KS 67205

Current Mailing Address:

8919 W. 21ST STREET NORTH
SUITE 200, #316
WICHITA, KS 67205 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
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, MANAGING MEMBER
Name	BSREP II WS HOTEL TERM MM LLC
Address	8919 W. 21ST STREET NORTH SUITE 200, #316
City-State-Zip:	WICHITA KS 67205

Title	MEMBER
Name	BSREP II WS HOTEL TERM MEZZ A LLC
Address	8919 W. 21ST STREET NORTH SUITE 200, #316
City-State-Zip:	WICHITA KS 67205

Title	SENIOR VICE PRESIDENT
Name	LANCASTER, AMY
Address	250 VESEY STREET, 15TH FLOOR
City-State-Zip:	NEW YORK NY 10281

Title	TREASURER
Name	WILLEY, RYAN
Address	1997 ANNAPOLIS EXCHANGE PKWY, SUITE 550
City-State-Zip:	ANNAPOLIS MD 21401

Title	SENIOR COUNSEL, SECRETARY
Name	SCHOENBERGER, LAURA
Address	8919 W. 21ST STREET NORTH SUITE 200, #316
City-State-Zip:	WICHITA KS 67205

Title	COO
Name	WRIGHT, DARIEN
Address	799 9TH STREET NW, SUITE 260
City-State-Zip:	WASHINGTON DC 20001

Title	SENIOR VICE PRESIDENT
Name	CLAYTON, ROY (ZIGGY)
Address	8919 W. 21ST STREET NORTH SUITE 200, #316
City-State-Zip:	WICHITA KS 67205

Title	VP
Name	ZYSOPOULOS, JAMES
Address	250 VESEY STREET, 15TH FLOOR
City-State-Zip:	NEW YORK NY 10281

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: LAURA SCHOENBERGER — 04/28/2021

Electronic Signature of Signing Authorized Person(s) Detail — Date