

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000003518

**Entity Name:** CF CAMPUS CLUB LLC

**Current Principal Place of Business:**

710 PEACHTREE STREET NE, STE 100  
ATLANTA, GA 30308

**Current Mailing Address:**

710 PEACHTREE STREET NE, STE 100  
ATLANTA, GA 30308 US

**FEI Number:** 82-4432555

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
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

**Authorized Person(s) Detail :**

Title           MANAGER, AUTHORIZED MEMBER  
Name           CF AM CAMPUS CLUB LLC  
Address        710 PEACHTREE STREET NE, STE  
                  100  
City-State-Zip: ATLANTA GA 30308

*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:** CF AM CAMPUS CLUB LLC

MANAGER

02/24/2023

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date