2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M2000009447

Entity Name: PNC ARHPF COUNTRY OAKS LLC

Current Principal Place of Business:

101 S. FIFTH ST., 7TH FLOOR LOUISVILLE, KY 40202

Current Mailing Address:

300 FIFTH AVE. ATTN: J. SALZMAN PITTSBURGH, PA 15222-2401 US

FEI Number: 85-2701477

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US FILED Mar 15, 2023 Secretary of State 3520908983CC

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

| | Title | AP | Title | MGR |
|--|-----------------|--------------------------------------|-----------------|-------------------------------|
| | Name | NUNNERY, JOHN | Name | PNC ARHPF COUNTRY OAKS MM LLC |
| | Address | 101 S. FIFTH ST., 7TH FLOOR | Address | 101 S. FIFTH ST., 7TH FLOOR |
| | City-State-Zip: | LOUISVILLE KY 40202 | City-State-Zip: | LOUISVILLE KY 40202 |
| | | | | |
| | Title | MBB | Title | AP |
| | The | MBR | The | AF |
| | Name | MBR PNC ARHPF COUNTRY OAKS MM LLC | Name | SALZMAN, JONATHAN |
| | | | | |
| | Name | PNC ARHPF COUNTRY OAKS MM LLC | Name | SALZMAN, JONATHAN |

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: JONATHAN SALZMAN

AUTHORIZED PERSON 03/15/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

Date