## Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: CARLA R. STONER

CHIEF FINANCIAL OFFICER

03/28/2024

# Mar 28, 2024

FILED

### 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	MEMBER	Title	CFO
Name	FLORIDA CARDINAL PORTFOLIO JV,	Name	STONER, CARLA R.
Address	LP 999 WATERSIDE DRIVE	Address	999 WATERSIDE DRIVE SUITE 2300
City-State-Zin	SUITE 2300 NORFOLK VA 23510	City-State-Zip:	NORFOLK VA 23510
Only Otate Zip.	North Gent VA 23310		

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.

Date

Date

Secretary of State 9115431983CC

#### 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M2000009729

Entity Name: STONEWOOD GARDENS MANAGING CO. GP, LLC

#### **Current Principal Place of Business:**

999 WATERSIDE DRIVE **SUITE 2300** NORFOLK, VA 23510

#### **Current Mailing Address:**

999 WATERSIDE DRIVE **SUITE 2300** NORFOLK, VA 23510 US

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

#### FEI Number: NOT APPLICABLE

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