

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000003062

**Entity Name:** SHADETREE GARDENS MANAGING CO. GP, LLC

**Current Principal Place of Business:**

999 WATERSIDE DR., STE. 2300  
NORFOLK, VA 23510

**Current Mailing Address:**

999 WATERSIDE DR., STE. 2300  
NORFOLK, VA 23510

**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

**Authorized Person(s) Detail :**

Title MGR  
Name LITTON, T. RICHARD JR.  
Address 999 WATERSIDE DR., STE. 2300  
City-State-Zip: NORFOLK VA 23510

Title MEMBER  
Name EMPIRE HOLDCO, LP  
Address 999 WATERSIDE DR., STE. 2300  
City-State-Zip: NORFOLK VA 23510

Title MEMBER  
Name EMPIRE HOLDCO GP, LLC  
Address 999 WATERSIDE DR., STE. 2300  
City-State-Zip: NORFOLK VA 23510

*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: T. RICHARD LITTON, JR.**

**MANAGER**

**05/26/2022**

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

\_\_\_\_\_  
Date