

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M95000000007

Entity Name: EASTDIL SECURED, L.L.C.**Current Principal Place of Business:**40 WEST 57TH STREET
NEW YORK, NY 10019**Current Mailing Address:**40 WEST 57TH STREET
NEW YORK, NY 10019 US**FEI Number:** 00-0576471**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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
Name	LAMBERT, BENJAMIN V
Address	40 WEST 57TH STREET
City-State-Zip:	NEW YORK NY 10019
Title	MANAGER
Name	VAN KONYNENBURG, D. MICHAEL
Address	100 WILSHIRE BLVD
City-State-Zip:	SANTA MONICA CA 90401
Title	MBR
Name	WELLS FARGO BANK LIMITED
Address	45 FREMONT STREET
City-State-Zip:	SAN FRANCISCO CA 94105

Title	MANAGER
Name	MARCH, ROY H
Address	40 WEST 57TH STREET
City-State-Zip:	NEW YORK NY 10019
Title	MANAGER
Name	BORZI, WILLIAM J
Address	100 WILSHIRE BLVD
City-State-Zip:	SANTA MONICA CA 90401

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: BENJAMIN V. LAMBERT**MANAGER****01/17/2018**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date