

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M9500000007

**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

**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 MGR  
Name LAMBERT, BENJAMIN V  
Address 40 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

Title MGR  
Name MARCH, ROY H  
Address 40 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

Title MGR  
Name VAN KONYNENBURG, D. MICHAEL  
Address 40 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

Title MGR  
Name BORZI, WILLIAM J  
Address 11150 WILSHIRE BLVD., SUITE 1500  
City-State-Zip: SANTA MONICA CA 90401

Title MBR  
Name WELLS FARGO BANK LIMITED  
Address 40 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

Title AUTHORIZED SIGNER  
Name WALLU, MARTHA T  
Address 40 WEST 57TH STREET  
City-State-Zip: NEW YORK NY 10019

*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: MARTHA T. WALLAU**

**AUTHORIZED SIGNER**

**04/18/2015**

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

\_\_\_\_\_  
Date