

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90393 019 ****50.00

DOCUMENT # M97000000409

1. Entity Name

REALTY ASSOCIATES FUND IV LLC

DO NOT WRITE IN THIS SPACE

956132

2. Principal Place of Business

c/o TA Associates Realty

Suite, Apt. #, etc.

28 State Street, 10th Floor

City & State

Boston, MA

Zip

02109

Country

USA

3. Mailing Address

c/o TA Associates Realty

Suite, Apt. #, etc.

28 State Street, 10th Floor

City & State

Boston, MA

Zip

02109

Country

USA

4. FEI Number

04-3341883

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301-2525

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
Realty Associates Advisors LLC
28 State Street, 10th Floor
Boston, MA 02109

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CR2E083B (12/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.
By: Realty Associates Advisors LLC, its MGR, by Realty Associates Advisors Trust, its sole

SIGNATURE *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/28/02 617-41762516 member