

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

10-02-2002 90117029 *****50.00
M98000000866

DOCUMENT # M98000000866

1. Entity Name

Capitol Tallahassee, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
800 Nicollet Mall

3. Mailing Address
same

Suite, Apt. #, etc.
J1012019

Suite, Apt. #, etc.

City & State
Minneapolis, MN

City & State

Zip
55402

Country
Hennepin

Zip

Country

4. FEI Number
31-1606404

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
NRAI Services, Inc.

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

526 East Park Avenue

City
Tallahassee

FL

Zip Code
32301

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

Sue Brodtmann
Signature: typed or printed name of registered agent and title if applicable.

Sue Brodtmann, Asst. Secretary

9/20/02
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

Capitol Realty I, LLC - Sole Member
800 Nicollet Mall, J1012019
Minneapolis, MN 55402

TITLE
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

Mark D. Appelbaum
Mark D. Appelbaum, Managing Member of the Sole Member

612/303-6652

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

Date

Daytime Phone #

CR2E083B (12/01)