2002 UNIFORM BUSINESS REPORT (UBR)

May 21, 2002 8:00 am Secretary of State DOCUMENT # M9900000620 1. Entity Name 05-21-2002 91188 015 ****50.00 SEVO WOODSIDE EXCHANGE LLC Principal Place of Business Mailing Address -3600 SOUTH YOSEMITE STREET, 10TH FLOOR 3800 SUUTH YOSEMITE STREET. 10TH FLOOR DENVER CO 80237 DENVER CO 80237 3. Mailing Address 2. Principal Place of Business 200 spruce 200 SPIJLE ST DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 57e 200 Suite, Apt. #, etc. 200:11 Applied For City & State 4, FEI Number City & State 55-2867391 دح Not Applicable DENJER Country \$5.00 Additional 5. Certificate of Status Desired 80230 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. Change ☐ Addition TITI F MGR Delete TITLE SEVO, JOHN M NAME NAME 200 SPRULY ST, STR 200 STREET ADDRESS 3600-SOUTH YOSEMITE-STREET, 10TH FLOOR STREET ADDRESS De10195 80230 CITY-ST-ZIP CITY-ST-ZIP DENVER CO 80237 X Change ☐ Addition MGR ☐ Delete TITLE TITLE MILLER, ANDREW S NAME 200 Spruce St Ste 200 3600 SOUTH-YOSEMITE STREET, 10TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DENVER CO 80297 ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

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

FILED