

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000009791

Entity Name: CC KENDALL II, LLC.**Current Principal Place of Business:**2020 SALZEDO ST, 5TH FLOOR
CORAL GABLES, FL 33134**Current Mailing Address:**2020 SALZEDO ST, 5TH FLOOR
CORAL GABLES, FL 33134 US**FEI Number:** 81-1165970**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GRAGG, K. LAWRENCE
2020 SALZEDO ST, 5TH FLOOR
CORAL GABLES, FL 33134 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 CC RESIDENTIAL, LLC
Address 2020 SALZEDO ST, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title DVP
Name CODINA, ARMANDO
Address 2020 SALZEDO ST, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title DP
Name CARR, JAMES
Address 2020 SALZEDO ST, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title DVPS
Name GRAGG, K. LAWRENCE
Address 2020 SALZEDO ST, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VPT
Name EISENACHER, HAROLD M
Address 2020 SALZEDO ST, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VPAS
Name BURNHAM, ANDREW
Address 2020 SALZEDO ST, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

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: K. LAWRENCE GRAGG**REGISTERED AGENT****03/10/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date