

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000190174

Entity Name: TRG MEMBER OF FL IV, LLC**Current Principal Place of Business:**477 SOUTH ROSEMARY AVENUE
SUITE 301
WEST PALM BEACH, FL 33401**Current Mailing Address:**477 SOUTH ROSEMARY AVENUE
SUITE 301
WEST PALM BEACH, FL 33401**FEI Number:** 82-2807850**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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 AUTHORIZED MEMBER
Name MILLER, KRISTIN M
Address 777 WEST PUTNAM AVENUE
City-State-Zip: GREENWICH CT 06830

Title SECRETARY
Name AMBROSECCHIA, JENNIFER
Address 777 WEST PUTNAM AVENUE
City-State-Zip: GREENWICH CT 06830

Title ASST. TREASURER
Name HUSSEY, JAMES
Address 777 WEST PUTNAM AVENUE
City-State-Zip: GREENWICH CT 06830

Title VP
Name FABBRI, WILLIAM T
Address 477 SOUTH ROSEMARY AVENUE,
SUITE 301
City-State-Zip: WEST PALM BEACH FL 33401

Title TREASURER
Name ANDERES, SAMANTHA
Address 777 WEST PUTNAM AVENUE
City-State-Zip: GREENWICH CT 06830

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: KRISTIN M. MILLER**04/05/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date