

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000003767

**FILED**  
**Apr 21, 2015**  
**Secretary of State**  
**CC7179901577**

**Entity Name:** ONE BISCAYNE TOWER MANAGER, LLC

**Current Principal Place of Business:**

8750 NORTH CENTRAL EXPRESSWAY  
SUITE 800  
DALLAS, TX 75231

**Current Mailing Address:**

8750 NORTH CENTRAL EXPRESSWAY  
SUITE 800  
DALLAS, TX 75231

**FEI Number:** 20-5267203

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 DOW EMPLOYEES PENSION PLAN  
Address 8750 NORTH CENTRAL EXPRESSWAY  
SUITE 800  
City-State-Zip: DALLAS TX 75231

Title AUTHORIZED MEMBER  
Name UNION CARBIDE EMPLOYEES  
PENSION PLAN  
Address 8750 NORTH CENTRAL EXPRESSWAY  
SUITE 800  
City-State-Zip: DALLAS TX 75231

Title AUTHORIZED REPRESENTATIVE  
Name GERIGK, MARK R  
Address 8750 NORTH CENTRAL EXPRESSWAY  
SUITE 800  
City-State-Zip: DALLAS TX 75231

*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:** MARK R GERIGK

**AUTH REP**

**04/21/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date