

**2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000001983

**Entity Name:** AH4R-FL 3, LLC

**Current Principal Place of Business:**

30601 AGOURA ROAD  
SUITE 200L  
AGOURA HILLS, CA 91301

**Current Mailing Address:**

30601 AGOURA ROAD  
SUITE 200L  
AGOURA HILLS, CA 91301 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 SINGELYN, DAVID P  
Address 30601 AGOURA ROAD  
SUITE 200L  
City-State-Zip: AGOURA HILLS CA 91301

Title MANAGER  
Name GOLDBERG, DAVID  
Address 30601 AGOURA ROAD  
SUITE 200L  
City-State-Zip: AGOURA HILLS CA 91301

Title MANAGER  
Name CORRIGAN, JOHN "JACK"  
Address 30601 AGOURA ROAD  
SUITE 200L  
City-State-Zip: AGOURA HILLS CA 91301

Title MANAGER  
Name VOGT-LOWELL, SARA  
Address 30601 AGOURA ROAD  
SUITE 200L  
City-State-Zip: AGOURA HILLS CA 91301

*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:** SARA VOGT-LOWELL

**MANAGER**

**01/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date