that my name appears above, or on an attachment with all other like empowered. 04/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000003101

Entity Name: EEFC 74 NW 24 OWNER, LLC

## **Current Principal Place of Business:**

C/O EAST END CAPITAL PARTNERS, LLC 600 MADISON AVENUE, 11TH FLOOR NEW YORK, NY 10022

## **Current Mailing Address:**

C/O EAST END CAPITAL PARTNERS, LLC 600 MADISON AVENUE, 11TH FLOOR NEW YORK, NY 10022

### FEI Number: 46-4983541

# Name and Address of Current Registered Agent:

C/O EAST END CAPITAL PARTNERS,

600 MADISON AVENUE, 11TH FLOOR

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

LLC

City-State-Zip: NEW YORK NY 10022

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:

Title

Title

Name

Address

Name Address

City-State-Zip:

Electronic Signature of Registered Agent Authorized Person(s) Detail : Titlo ۸D AR YOR

AR	The	AR
YORMAK, JONATHON K	Name	PERETZ, DAVID
600 MADISON AVENUE, 11TH FLOOR	Address	600 MADISON AVENUE, 11TH FLOOR
NEW YORK NY 10022	City-State-Zip:	NEW YORK NY 10022
AUTHORIZED REPRESENTATIVE RANNAZZISI, JOSEPH		

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

**AUTHORIZED** REPRESENTATIVE

Date

FILED Apr 15, 2015 Secretary of State CC3644110269

Date

Certificate of Status Desired: No

SIGNATURE: JOSEPH RANNAZZISI