2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000008067

Entity Name: PPF AMLI 9021 PETERS ROAD, LLC

Current Principal Place of Business:

141 W. JACKSON BOULEVARD

SUITE 300

CHICAGO, IL 60604

Current Mailing Address:

141 W. JACKSON BOULEVARD SUITE 300

CHICAGO, IL 60604 US

FEI Number: 61-1744294 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 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

FILED Apr 16, 2024

Secretary of State

2559047945CC

Authorized Person(s) Detail:

Title AUTHORIZED MEMBER Title AUTHORIZED MEMBER

Name PPF AMLI DEVCO, LLC Name AMLI RESIDENTIAL PROPERTIES, L.P.

Address 141 W. JACKSON BOULEVARD Address 141 W. JACKSON BOULEVARD

SUITE 300 SUITE 300

City-State-Zip: CHICAGO IL 60604 City-State-Zip: CHICAGO IL 60604

TitleSECRETARYTitleASST. SECRETARYNameEVANGELOU, ALINANameMARTENS, JULIE

Address 141 W. JACKSON BOULEVARD Address 141 W. JACKSON BOULEVARD

SUITE 300 SUITE 300

City-State-Zip: CHICAGO IL 60604 City-State-Zip: CHICAGO IL 60604

Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE

Name ROSS, STEPHAN C Name RICE, ALICIA

Address 141 W. JACKSON BOULEVARD Address 888 EAST LAS OLAS BOULEVARD

SUITE 300 STE 601

City-State-Zip: CHICAGO IL 60604 City-State-Zip: FORT LAUDERDALE FL 33301

Title AUTHORIZED REPRESENTATIVE

Name THOMSON, MATTHEW

Address 888 EAST LAS OLAS BOULEVARD

STE 601

City-State-Zip: FORT LAUDERDALE FL 33301

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: JULIE MARTENS ASSISTANT SECRETARY 04/16/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date