

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1500009728

Entity Name: CUBE III TRS LLC

Current Principal Place of Business:

5 OLD LANCASTER ROAD
MALVERN, PA 19355

Current Mailing Address:

5 OLD LANCASTER ROAD
MALVERN, PA 19355 US

FEI Number: 46-4262098

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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

Authorized Person(s) Detail :

Title AP
Name MARR, CHRISTOPHER P
Address 5 OLD LANCASTER ROAD
City-State-Zip: MALVERN PA 19355

Title AP
Name MARTIN, TIMOTHY M
Address 5 OLD LANCASTER ROAD
City-State-Zip: MALVERN PA 19355

Title AP
Name FOSTER, JEFFREY P
Address 5 OLD LANCASTER ROAD
City-State-Zip: MALVERN PA 19355

Title AP
Name TYRELL, DOUGLAS
Address 5 OLD LANCASTER ROAD
City-State-Zip: MALVERN PA 19355

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: JEFFREY P. FOSTER

AUTHORIZED PERSON

01/03/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date