

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1500009786

**Entity Name:** LG FOWLER AND 51ST, LLC

**Current Principal Place of Business:**

3500 MAPLE AVE.  
SUITE 1600  
DALLAS, TX 75219

**FILED**  
**Apr 26, 2019**  
**Secretary of State**  
**0183755946CC**

**Current Mailing Address:**

3500 MAPLE AVE.  
SUITE 1600  
DALLAS, TX 75219 US

**FEI Number: 81-0684321**

**Certificate of Status Desired: No**

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DR SUITE A  
TALLAHASSEE, FL 32301 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 DE LEON, FERNANDO  
Address 3500 MAPLE AVE.  
SUITE 1600  
City-State-Zip: DALLAS TX 75219

Title VP  
Name PIVNICK, ROB  
Address 3500 MAPLE AVE.  
SUITE 1600  
City-State-Zip: DALLAS TX 75219

Title VP  
Name ARAIZA, JESUS  
Address 3500 MAPLE AVE.  
SUITE 1600  
City-State-Zip: DALLAS TX 75219

Title VP  
Name TOLLIVER, WILL  
Address 3500 MAPLE AVE.  
SUITE 1600  
City-State-Zip: DALLAS TX 75219

Title VP  
Name BLOOMFIELD, MATT  
Address 3500 MAPLE AVE.  
SUITE 1600  
City-State-Zip: DALLAS TX 75219

*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: FERNANDO DE LEON**

**MANAGER**

**04/26/2019**

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

\_\_\_\_\_  
Date