

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000003775

Entity Name: PREFERRED CAMPUS MANAGEMENT, LLC

Current Principal Place of Business:

3284 NORTHSIDE PARKWAY NW STE 150
ATLANTA, GA 30327

Current Mailing Address:

3284 NORTHSIDE PARKWAY NW STE 150
ATLANTA, GA 30327 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VCORP SERVICES, LLC
5011 SOUTH STATE ROAD 7 STE 106
DAVIE, FL 33314 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 PREFERRED CAMPUS
COMMUNITIES, INC
Address 3284 NORTHSIDE PARKWAY NW STE
150
City-State-Zip: ATLANTA GA 30327

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: VCORP COMPLIANCE

AUTHORIZED AGENT

04/18/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date