

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000004742

**Entity Name:** BROADSTONE RIVER HOUSE ALLIANCE, LLC**Current Principal Place of Business:**7135 E CAMELBACK ROAD  
SUITE 360  
SCOTTSDALE, AZ 85251**Current Mailing Address:**7135 E CAMELBACK ROAD  
SUITE 360  
SCOTTSDALE, AZ 85251 US**FEI Number: NOT APPLICABLE****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 MEMBER  
Name GING, MICHAEL  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251

Title MEMBER  
Name ZELEDON, JOHN  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251

Title MEMBER  
Name DUKES, PATRICK  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251

Title MEMBER  
Name WESTON, ROBERT G. JR.  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251

Title MEMBER  
Name RIPPEL, JOHN T.  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251

Title MEMBER  
Name AUSTIN, BRIAN  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251

Title CHIEF FINANACIAL OFFICER  
Name WESTON, BOB  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251

Title MEMBER  
Name BAKER STREET HOLDINGS, L.L.C.  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251

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*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: V. JAY HIEMENZ****AUTHORIZED SIGNOR****03/29/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title MEMBER  
Name CHAPMAN, NICHOLAS  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251

Title AUTHORIZED SIGNOR  
Name HIEMENZ, V. JAY  
Address 7135 E CAMELBACK ROAD  
SUITE 360  
City-State-Zip: SCOTTSDALE AZ 85251