# 2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000003129

Entity Name: CUBE IV TRS LLC

## **Current Principal Place of Business:**

5 OLD LANCASTER RD MALVERN, PA 19355

# **Current Mailing Address:**

5 OLD LANCASTER RD MALVERN, PA 19355 US

# FEI Number: 30-1010607

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

### Certificate of Status Desired: No

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

### Authorized Person(s) Detail :

Title	P	Title	т
Name	MARR, CHRISTOPHER P	Name	MARTIN, TIMOTHY
Address	5 OLD LANCASTER RD	Address	5 OLD LANCASTER RD
City-State-Zip:	MALVERN PA 19355	City-State-Zip:	MALVERN PA 19355
Title	VPS	Title	VP
Title Name	VPS FOSTER, JEFFREY P	Title Name	VP TYRELL, DOUGLAS

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

VICE PRESIDENT

01/05/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Jan 05, 2021 Secretary of State 9351877082CC

Date