2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 21, 2025
Secretary of State
2137097903CC

DOCUMENT# M18000004028

Entity Name: CPI LOWE'S CITY TRS, L.L.C.

Current Principal Place of Business:

10100 SANTA MONICA BLVD
SUITE 600
LOS ANGELES, CA 90067

Current Mailing Address:

10100 SANTA MONICA BLVD
SUITE 600
LOS ANGELES, CA 90067 US

FEI Number: 82-5330959

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	Title	AUTHORIZED PERSON
Name	CPI LOWE'S CITY OWNER, L.L.C.	Name	WILLIAMS, JAMES
Address	10100 SANTA MONICA BLVD SUITE 600	Address	10100 SANTA MONICA BLVD SUITE 600
City-State-Zip:	LOS ANGELES CA 90067	City-State-Zip:	LOS ANGELES CA 90067
Title	AUTHORIZED PERSON	Title	AUTHORIZED PERSON
Name	EPPS, SARAH	Name	LEVY, THOMAS
Address	10100 SANTA MONICA BLVD SUITE 600	Address	10100 SANTA MONICA BLVD SUITE 600
City-State-Zip:	LOS ANGELES CA 90067	City-State-Zip:	LOS ANGELES CA 90067

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: STACY M. WEINER AUTHORIZED SIGNOR 03/21/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date