

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000004141

FILED
Apr 15, 2023
Secretary of State
0224161604CC

Entity Name: ASB TENTH AVENUE HOLDINGS, LLC

Current Principal Place of Business:

C/O ASB CAPITAL MANAGEMENT LLC
7501 WISCONSIN AVE., SUITE 1300W
BETHESDA, MD 20814

Current Mailing Address:

C/O ASB CAPITAL MANAGEMENT LLC
7501 WISCONSIN AVE., SUITE 1300W
BETHESDA, MD 20814 US

FEI Number: 36-4897599

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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, MANAGER	Title	PRESIDENT
Name	ASB ALLEGIANCEINVESTMENTSLLC	Name	BELLINGER, ROBERT B.
Address	C/O ASB CAPITAL MANAGEMENT LLC 7501 WISCONSIN AVE., SUITE 1300W	Address	C/O ASB CAPITAL MANAGEMENT LLC 7501 WISCONSIN AVE., SUITE 1300W
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814
Title	SENIOR VICE PRESIDENT	Title	TREASURER
Name	QUIGLEY, DAVID T.	Name	HIERONYMUS, JOHN
Address	C/O ASB REAL ESTATE INVESTMENTS 744 COWPER STREET	Address	C/O ASB CAPITAL MANAGEMENT LLC 7501 WISCONSIN AVE., SUITE 1300W
City-State-Zip:	PALO ALTO CA 94301	City-State-Zip:	BETHESDA MD 20814
Title	VP	Title	VP
Name	BRAITHWAITE, LAWRENCE	Name	FRANZETTI, NICOLAS
Address	C/O ASB CAPITAL MANAGEMENT LLC 7501 WISCONSIN AVE., SUITE 1300W	Address	C/O ASB CAPITAL MANAGEMENT LLC 7501 WISCONSIN AVE., SUITE 1300W
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814
Title	VP	Title	SECRETARY
Name	RULAND, BRODIE	Name	REED, BRENDAN J.
Address	C/O ASB CAPITAL MANAGEMENT LLC 7501 WISCONSIN AVE., SUITE 1300W	Address	C/O ASB CAPITAL MANAGEMENT LLC 7501 WISCONSIN AVE., SUITE 1300W
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814

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: BRENDAN J. REED

SECRETARY

04/15/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date