

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000004995

**Entity Name:** HIDDEN GROVE HOUSING GP, LLC

**Current Principal Place of Business:**

60 COLUMBUS CIR, 19TH FLOOR  
NEW YORK, NY 10023

**Current Mailing Address:**

60 COLUMBUS CIR, 19TH FLOOR  
NEW YORK, NY 10023 US

**FEI Number:** 83-3875140

**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           MANAGING MEMBER  
Name           SMR HOLDINGS, L.L.C.  
Address        60 COLUMBUS CIR, 19TH FLOOR  
City-State-Zip: NEW YORK NY 10023

Title           AUTHORIZED MEMBER  
Name           YUKON CALIFORNIA, LLC  
Address        60 COLUMBUS CIR, 19TH FLOOR  
City-State-Zip: NEW YORK NY 10023

Title           AUTHORIZED MEMBER  
Name           BABJR HOLDINGS LLC  
Address        60 COLUMBUS CIR, 19TH FLOOR  
City-State-Zip: NEW YORK NY 10023

Title           AUTHORIZED MEMBER  
Name           FULL LINE, LLC  
Address        60 COLUMBUS CIR, 19TH FLOOR  
City-State-Zip: NEW YORK NY 10023

Title           AUTHORIZED MEMBER  
Name           WEDNESDAY HILL LLC  
Address        60 COLUMBUS CIR, 19TH FLOOR  
City-State-Zip: NEW YORK NY 10023

*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:** JENNIFER MCCOOL

**SECRETARY**

**01/22/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date