

2020 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M19000007847

Entity Name: BOF FL MUSEUM TOWER LLC

Current Principal Place of Business:

111 E. SEGO LILY DRIVE
SUITE 400
SANDY, UT 84070

Current Mailing Address:

111 E. SEGO LILY DRIVE
SUITE 400
SANDY, UT 84070 US

FEI Number: 84-2713608

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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 BRIDGE OFFICE HOLDINGS LLC
Address 111 E. SEGO LILY DRIVE
SUITE 400
City-State-Zip: SANDY UT 84070

Title MANAGER
Name SLAGER, JONATHAN
Address 111 E. SEGO LILY DRIVE
SUITE 400
City-State-Zip: SANDY UT 84070

Title MANAGER
Name WARD, JOHN
Address 111 E. SEGO LILY DRIVE
SUITE 400
City-State-Zip: SANDY UT 84070

Title AUTHORIZED SIGNOR
Name URBINA, DIANA
Address 111 E. SEGO LILY DRIVE
SUITE 400
City-State-Zip: SANDY UT 84070

Title AUTHORIZED SIGNOR
Name EVERETT, KEITH
Address 111 E. SEGO LILY DRIVE
SUITE 400
City-State-Zip: SANDY UT 84070

Title AUTHORIZED SIGNOR
Name KUYKENDALL, KELLY
Address 111 E. SEGO LILY DRIVE
SUITE 400
City-State-Zip: SANDY UT 84070

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: JONATHAN SLAGER

MANAGER

06/22/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date