

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001690

Entity Name: RAYDIENT PLACES + PROPERTIES LLC**Current Principal Place of Business:**1 RAYONIER WAY
WILDLIGHT, FL 32097**Current Mailing Address:**1 RAYONIER WAY
WILDLIGHT, FL 32097 US**FEI Number:** 59-3607205**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 VP
Name ARTHUR, TRACY K
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title VICE PRESIDENT AND SECRETARY
Name BRIDWELL, MARK R.
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title VP
Name SAWICKI, KYLE M
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title TREASURER
Name MCHUGH, MARK
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title PRESIDENT
Name CORR, CHRISTOPHER T.
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title VP
Name CUNNINGHAM, WILLIAM A.
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title VP
Name TICE, APRIL J.
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title VP
Name ROGERS, W. RHETT
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Continues on page 2

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: JAIME NORTHRUP

VP

04/02/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP
Name CAMPBELL, JOHN R.
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title VP
Name PYATT, SHELBY L
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title VP
Name NORTHRUP, JAIME
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title VP
Name ROSE, JONATHAN P
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097

Title VP
Name HINTON, WESLEY B
Address 1 RAYONIER WAY
City-State-Zip: WILDLIGHT FL 32097