| No. W 169953 | | Due no later than Aug 31, 2018 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---|--|--|---|----------|------------|----------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. CCP-PI LESSEE, LLC CCP-PI LESSEE, LLC 3250 OCEAN PARK BLVD SUITE 355 | | REGISTERED AGENT SOLUTIONS INC 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | SANTA MONICA CA 90405 USA | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held Na | ame | | Street or PO Address | City | State | Country | Postal Code |
| | CHURCHILL STATESIDE [], LLC CCP-PI MANAGING MEMBER, LLC | | 601 CLEVELAND STREET SUITE 850 3250 OCEAN PARK BLVD SUITE 355 | CLEARWATER SANTA MONICA | FL CA | USA USA | 33755 90405 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 169953 | | Signature: Evan Riley | | Date: 08/30/2018 | | | |
| | | Name (type or print): Evan Riley | | Title: Authorized Person | | | |
| Processed 08/30/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | |