

Filed
Secretary of State
State of Washington
Date Filed: 01/12/2024
Effective Date: 01/12/2024
UBI #: 603 269 918

EXPRESS ANNUAL REPORT WITHOUT CHANGES

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Business Name:

GROVE PLAZA LLC

UBI Number: **603 269 918**

Business Type:

WA LIMITED LIABILITY COMPANY

Business Status: **ACTIVE**

Principal Office Street Address:

44 MONTGOMERY ST., SUITE 3700, SAN FRANCISCO, CA, 94104, UNITED STATES

Principal Office Mailing Address:

44 MONTGOMERY ST., SUITE 3700, SAN FRANCISCO, CA, 94104, UNITED STATES

Expiration Date:

01/31/2025

Jurisdiction:

UNITED STATES, WASHINGTON

Formation/Registration Date:

01/22/2013

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

REAL PROPERTY INVESTMENT

REGISTERED AGENT RCW 23.95.410

Registered Agent Name Street Address Mailing Address

NATIONAL REGISTERED 711 CAPITOL WAY S STE 204, OLYMPIA, WA, AGENTS, INC. 711 CAPITOL WAY S STE 204, OLYMPIA, WA, 98501-1267, UNITED STATES 98501-1267, UNITED STATES

GOVERNORS

Title Type Entity Name First Name Last Name

GOVERNOR ENTITY FB LLC

CONTROLLING INTEREST

- 1. Does this entity own (hold title) real property in Washington, such as land or buildings, including leasehold improvements?
- No
- 2. In the past 12 months, has there been a transfer of at least 16-2/3 percent of the ownership, stock, or other financial interest in the entity?
- No
- a. If "Yes", in the **past 36 months**, has there been a transfer of controlling interest (50 percent or greater) of the ownership, stock, or other financial interest in the entity?
- No
- 3. If you answered "Yes" to question 2a, has a controlling interest transfer return been filed with the Department of Revenue?
- No

You must submit a Controlling Interest Transfer Return form if you answered "yes" to questions 1 and 2a.

Failure to report a Controlling Interest Transfer is subject to penalty provisions of RCW 82.45.220.

For more information on Controlling Interest, visit www.dor.wa.gov/REET.

CONFIRMATION EMAIL ADDRESS

Note: Please enter in the email address you would like confirmation sent of this annual report and payment receipt.

Email Address:

WTRAN@FRIEDKINPROPERTY.COM

EMAIL OPT-IN

By checking this box, I hereby opt into receiving all notifications from the Secretary of State for this entity via email only. I acknowledge that I will no longer receive paper notifications.

AUTHORIZED PERSON

Person Type:

ENTITY

First Name:

KYLE

Last Name:

BACH

Entity Name:

FB LLC

Title:

CEO OF MANAGER

This document is hereby executed under penalty of law and is to the best of my knowledge, true and correct.