

Filed
Secretary of State
State of Washington
Date Filed: 11/16/2022
Effective Date: 11/16/2022
UBI #: 604 537 952

EXPRESS ANNUAL REPORT WITH CHANGES

BUSINESS INFORMATION

Business Name:

CEP III - VILLAS 19, LLC

UBI Number: **604 537 952**

Business Type:

WA LIMITED LIABILITY COMPANY

Business Status:

ACTIVE

Principal Office Street Address:

2829 RUCKER AVE, EVERETT, WA, 98201-3456, UNITED STATES

Principal Office Mailing Address:

Expiration Date:

11/30/2023

Jurisdiction:

UNITED STATES, WASHINGTON

Formation/Registration Date:

11/08/2019

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

PR CORP. SERVICES, 10900 NE 4TH ST STE 1850, BELLEVUE, WA, 98004-8341, UNITED

INC. STATES

PRINCIPAL OFFICE

Phone:

Email:

PRCORP@PRKLAW.COM

Street Address:

Work Order #: 2022111600709678 - 1 Received Date: 11/16/2022

Amount Received: \$60.00

2829 RUCKER AVE, EVERETT, WA, 98201-3456, USA

Mailing Address:

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Title	Type	Entity Name	First Name	Last Name
GOVERNOR	ENTITY	CEP III - VILLAS MANAGER, LLC		

NATURE OF BUSINESS

REAL PROPERTY INVESTMENT

EFFECTIVE DATE

Effective Date: 11/16/2022

CONTROLLING INTEREST

- 1. Does this entity own (hold title) real property in Washington, such as land or buildings, including leasehold improvements? **YES**
- 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.

RETURN ADDRESS FOR THIS FILING
Attention: Email: Address:
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:

This document is a public record. For more information visit www.sos.wa.gov/corps

LESLIE

Last Name:

GREEN

Entity Name:

PR CORP. SERVICES, INC.

ASST. SECRETARY

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

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