

Filed
Secretary of State
State of Washington
Date Filed: 04/04/2023
Effective Date: 04/04/2023
UBI #: 604 445 376

EXPRESS ANNUAL REPORT WITHOUT CHANGES

BUSINESS INFORMATION

Business Name:

MILL AT MC 1, LLC

UBI Number: **604 445 376**

Business Type:

FOREIGN LIMITED LIABILITY COMPANY

Business Status:

ACTIVE

Principal Office Street Address:

2000 AVENUE OF THE STARS FL 11, LOS ANGELES, CA, 90067-4732, UNITED STATES

Principal Office Mailing Address:

2000 AVENUE OF THE STARS FL 11, LOS ANGELES, CA, 90067-4732, UNITED STATES

Expiration Date:

04/30/2024

Jurisdiction:

UNITED STATES, DELAWARE

Formation/Registration Date:

04/23/2019

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

REAL ESTATE, REAL ESTATE HOLDING COMPANY

REGISTERED AGENT RCW 23.95.410

Registered Agent Name Street Address Mailing
Address

COGENCY GLOBAL 1780 BARNES BLVD SW, TUMWATER, WA, 98512-0410, UNITED

INC. STATES

GOVERNORS

Title Type Entity Name First Name Last Name

GOVERNOR ENTITY CCF SACK PROPERTIES IV, LLC

Work Order #: 2023040400243938 - 1 Received Date: 04/04/2023

Amount Received: \$60.00

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 <u>www.dor.wa.gov/REET</u>.

CONFIRMATION EMAIL ADDRESS

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

Email Address:

ESCHMITT@CANYONPARTNERS.COM

AUTHORIZED PERSON

Person Type:

INDIVIDUAL

First Name:

EDWARD

Last Name:

SCHMITT

Title:

AUTHORIZED SIGNATORY

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

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