

Filed
Secretary of State
State of Washington
Date Filed: 04/29/2024
Effective Date: 04/29/2024
UBI #: 604 117 279

## **Annual Report**

## **BUSINESS INFORMATION**

Business Name:

BORDEAUX VENTURE LLC

UBI Number: **604 117 279** 

Business Type:

FOREIGN LIMITED LIABILITY COMPANY

**Business Status:** 

ACTIVE

Principal Office Street Address:

701 FIFTH AVE STE 5700, SEATTLE, WA, 98104, UNITED STATES

Principal Office Mailing Address:

Expiration Date:

04/30/2025

Jurisdiction:

UNITED STATES, DELAWARE

Formation/Registration Date:

04/25/2017

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

REAL ESTATE

## REGISTERED AGENT RCW 23.95.410

Registered Agent Name Street Address Mailing Address

SECURITY PROPERTIES INC 701 5TH AVE STE 5700, SEATTLE, WA, 98104-7014, UNITED STATES

PRINCIPAL OFFICE

Phone:

Email:

KATEP@SECPROP.COM

Street Address:

701 FIFTH AVE STE 5700, SEATTLE, WA, 98104, USA

GOVERNORS				
Title	Туре	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL			SP BORDEAUX LLC
NATURE OF BUSI	INESS			
REAL ESTA	ATE			
EFFECTIVE DATE	<u>.</u>			
Effective Date: <b>04/29/2024</b>	-			
CONTROLLING IN	NTEREST			
- No 2. In the past 12 mo - No a. If "Yes", in th financial interest in t - No 3. If you answered ' - No You must submit a C Failure to report a Co	e past 36 months, has there	fer of at least 16-2/3 percent been a transfer of controlling ontrolling interest transfer re Return form if you answere as subject to penalty provision	t of the ownership, stocking interest (50 percent of eturn been filed with the etd "yes" to questions 1 at ons of RCW 82.45.220.	r greater) of the ownership, stock, or other  Department of Revenue?
Attention: Email: Address:				
UPLOAD ADDITIO	NAL DOCUMENTS			
Do you have addition	nal documents to upload? - I	No		
EMAIL OPT-IN				
	s box, I hereby opt into receive paper notifications.	ving all notifications from t	he Secretary of State for	r this entity via email only. I acknowledge that
AUTHORIZED PE	RSON			
I am an authoriz	zed person.			
Person Type: INDIVIDUAL				
First Name: <b>KATE</b>				
Last Name: <b>POPICH</b>				

Mailing Address:

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