

EXPRESS ANNUAL REPORT WITH CHANGES

BUSINESS INFORMATION

Business Name:

PMI EVERETT LLC

UBI Number:

604 488 234

Business Type:

FOREIGN LIMITED LIABILITY COMPANY

Business Status:

ACTIVE

Principal Office Street Address:

777 CALIFORNIA AVE, PALO ALTO, CA, 94304-1102, UNITED STATES

Principal Office Mailing Address:

Expiration Date:

07/31/2021

Jurisdiction:

UNITED STATES, DELAWARE

Formation/Registration Date:

07/30/2019

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

REAL PROPERTY INVESTMENT, REAL ESTATE INVESTMENTS

REGISTERED AGENT [RCW 23.95.410](#)

Registered Agent Name	Street Address	Mailing Address
C T CORPORATION SYSTEM	711 CAPITOL WAY S STE 204, OLYMPIA, WA, 98501, UNITED STATES	711 CAPITOL WAY S STE 204, OLYMPIA, WA, 98501, UNITED STATES

PRINCIPAL OFFICE

Phone:

Email:

BPERKINS@MMCREALESTATE.COM

Street Address:

777 CALIFORNIA AVE, PALO ALTO, CA, 94304-1102, USA

Mailing Address:

GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	ENTITY	PACIFIC MULTIFAMILY INVESTORS LLC		

NATURE OF BUSINESS

- REAL PROPERTY INVESTMENT
- REAL ESTATE INVESTMENTS

EFFECTIVE DATE

Effective Date:
07/20/2020

CONTROLLING INTEREST

1. Does your entity own real property such as land or buildings (including leasehold interests) in Washington?

NO

2. As of January 1, 2019, has there been a transfer of stock, other financial interest change, or an option agreement exercised that resulted in a transfer of at least 16⅔ percent interest in the entity?

NO

a. If "yes", has the transfer of stock, other financial interest change, or an option agreement exercised resulted in a transfer of controlling interest (50 percent or greater)?

NO

3. As of January 1, 2019, has an option agreement been executed allowing for the future purchase or acquisition of the entity?

NO

You must report a [Controlling Interest Transfer Return](#) 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:

INDIVIDUAL

First Name:

KALEEN

Last Name:

SCOTT

Title:

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