

## EXPRESS ANNUAL REPORT WITH CHANGES

### BUSINESS INFORMATION

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Business Name:

**SCG ATLAS SAGE, L.L.C.**

UBI Number:

**603 570 345**

Business Type:

**FOREIGN LIMITED LIABILITY COMPANY**

Business Status:

**ACTIVE**

Principal Office Street Address:

**591 WEST PUTNAM AVENUE, GREENWICH, CT, 06830, UNITED STATES**

Principal Office Mailing Address:

**591 WEST PUTNAM AVENUE, GREENWICH, CT, 06830, UNITED STATES**

Expiration Date:

**12/31/2021**

Jurisdiction:

**UNITED STATES, DELAWARE**

Formation/Registration Date:

**12/24/2015**

Period of Duration:

**PERPETUAL**

Inactive Date:

Nature of Business:

**REAL ESTATE**

### REGISTERED AGENT [RCW 23.95.410](#)

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Registered Agent Name	Street Address	Mailing Address
C T CORPORATION SYSTEM	711 CAPITOL WAY S STE 204, OLYMPIA, WA, 98501-1267, UNITED STATES	711 CAPITOL WAY S STE 204, OLYMPIA, WA, 98501-1267, UNITED STATES

### PRINCIPAL OFFICE

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Phone:

**877-858-3855**

Email:

CLS-CTARMSEVIDENCE@WOLTERSKLUWER.COM

Street Address:

591 WEST PUTNAM AVENUE, GREENWICH, CT, 06830, USA

Mailing Address:

591 WEST PUTNAM AVENUE, GREENWICH, CT, 06830, USA

## GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	ENTITY	SCG ATLAS SAGE HOLDINGS, L.L.C.		

## NATURE OF BUSINESS

REAL ESTATE

## EFFECTIVE DATE

Effective Date:

10/26/2020

## 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](http://www.dor.wa.gov/REET).

## RETURN ADDRESS FOR THIS FILING

Attention:

KELLY LETTMANN

Email:

CLS-CTARMSEVIDENCE@WOLTERSKLUWER.COM

Address:

120 SOUTH CENTRAL AVENUE, SUITE 400, CLAYTON, MO, 63105, USA

## 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

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Person Type:

**INDIVIDUAL**

First Name:

**KELLY**

Last Name:

**LETTMANN**

Title:

**OTHER**

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