

Filed Secretary of State State of Washington Date Filed: 10/30/2023 Effective Date: 10/30/2023

UBI #: 603 551 700

Annual Report

BUSINESS INFORMATION

Business Name:

CSH HARBOUR POINTE, LLC

UBI Number: **603 551 700**

Business Type:

FOREIGN LIMITED LIABILITY COMPANY

Business Status:

ACTIVE

Principal Office Street Address:

1275 PENNSYLVANIA AVE, NW, SECOND FLOOR, WASHINGTON, DC, 20004, UNITED STATES

Principal Office Mailing Address:

1275 PENNSYLVANIA AVE, NW, SECOND FLOOR, WASHINGTON, DC, 20004

Expiration Date:

10/31/2024

Jurisdiction:

UNITED STATES, DELAWARE

Formation/Registration Date:

10/16/2015

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

SENIOR HOUSING

REGISTERED AGENT RCW 23.95.410

Registered Agent Name Street Address Mailing Address

C T CORPORATION 711 CAPITOL WAY S STE 204, OLYMPIA, WA, 711 CAPITOL WAY S STE 204, OLYMPIA, WA,

SYSTEM 98501-1267, UNITED STATES 98501-1267, UNITED STATES

PRINCIPAL OFFICE

Phone:

8778583855

Email:

CLS-CTARMSEVIDENCE@WOLTERSKLUWER.COM

Street Address:

1275 PENNSYLVANIA AVE, NW, SECOND FLOOR, WASHINGTON, DC, 20004, USA

Mailing Address:

1275 PENNSYLVANIA AVE, NW, SECOND FLOOR, WASHINGTON, DC, 20004, USA

GOVERNORS				
Title	Type	Entity Name	First Name	Last Name
GOVERNOR	ENTITY	CSH PROGRAM REIT III INC.		
NATURE OF BUS	INESS			
SENIOR H	OUSING			
EFFECTIVE DATE	≣			
Effective Date: 10/30/2023				
CONTROLLING IN	NTEREST			
- Yes 2. In the past 12 me - No a. If "Yes", in the financial interest in the No 3. If you answered the No You must submit a Company of the Failure to report a Company of the Failure to repor	onths, has there been the past 36 months, has there been the past 36 months, has the entity? "Yes" to question 2a Controlling Interest Ton on Controlling Interest Ton O	property in Washington, such as land or building in a transfer of at least 16-2/3 percent of the own has there been a transfer of controlling interest (so that a controlling interest transfer return been for transfer Return form if you answered "yes" to corransfer is subject to penalty provisions of RCW interest, visit www.dor.wa.gov/REET .	ership, stock, or other financial is 50 percent or greater) of the own iled with the Department of Revuluestions 1 and 2a.	nterest in the entity?
Attention: Email:				
Address:				
UPLOAD ADDITIO				
Do you have additio	onal documents to up	load? - No		
EMAIL OPT-IN				
By checking thi I will no longer rece		nto receiving all notifications from the Secretary	y of State for this entity via emai	l only. I acknowledge that
AUTHORIZED PE	RSON			
I am an authoriz	zed person.			
Person Type: INDIVIDUAL				
First Name:				

KELLY

Last Name:

LETTMANN

Title:

POWER OF ATTORNEY

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

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

Work Order #: 2023103000697848 - 1 Received Date: 10/30/2023 Amount Received: \$70.00