RI SOS Filing Number: 202326655780 Date: 1/25/2023 12:13:00 PM

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2015

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2023 JAN 25 P 12: 12

Limited Liability Company → Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

| 1. Entity ID Number 000548346 | 2. Exact name of the Limited Liability Company SCP 2010-C35-530 LLC | | | | |
|--|--|----------------------------|------------------------|----------------------|--|
| 3. NAICS Code 5. State of Formation DE | Brief description of the character of business conducted in Rhode Island REAL ESTATE | | | | |
| 6. Principal Office Address | | City | State | Zip | |
| 545 E JOHN CARPENTER FREEWAY Ste 1400 | | IRVING | TX | 75062 | |
| 7. Mailing Address of Limited | Liability Company and Name or Title | of Contact Person | | | |
| Contact Name PAUL R WOMBLE | | Contact Title Manager | | | |
| Street Address 545 E JOHN CARPENTER FREEWA | | City IRVING | State TX | ^{Zıp} 75062 | |
| 8. The Resident Agent informa | ation currently of record with the RI [| Department of State is acc | urate. Changes require | filing Form 642. | |
| | leciare and affirm that I have exam ements contained herein are true | | ng any accompanying | g schedules and | |
| Name of Authorized Person | | - | Date | Date | |
| PAUL R WOMBLE | | | 1/23/2023 | | |
| Signature of Authorized Person | on | | | | |

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

FORM 632 - Revised: 11/2021