

**2022 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M21000000437

**Entity Name:** TEN-X COMMERCIAL, LLC**Current Principal Place of Business:**17600 LAGUNA CANYON ROAD  
IRVINE, CA 92618**Current Mailing Address:**17600 LAGUNA CANYON ROAD  
IRVINE, CA 92618 US**FEI Number:** 52-2134617**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Authorized Person(s) Detail :**

Title MEMBER  
Name COSTAR REALTY INFORMATION INC  
Address 1331 L STREET NW  
City-State-Zip: WASHINGTON DC 20005

Title MANAGER  
Name JACOBS, STEVE  
Address 17600 LAGUNA CANYON ROAD  
City-State-Zip: IRVINE CA 92618

Title MANAGER  
Name VANDERMYDE, MATTHEW  
Address 17600 LAGUNA CANYON ROAD  
City-State-Zip: IRVINE CA 92618

Title MANAGER  
Name CORBAT, SAMANTHA  
Address 17600 LAGUNA CANYON ROAD  
City-State-Zip: IRVINE CA 92618

Title MANAGER  
Name FIGUEROA, JESSICA  
Address 17600 LAGUNA CANYON ROAD  
City-State-Zip: IRVINE CA 92618

Title MANAGER  
Name RICHARDSON, ARLENE  
Address 17600 LAGUNA CANYON ROAD  
City-State-Zip: IRVINE CA 92618

Title MANAGER  
Name VASOGHI, MICHAEL  
Address 17600 LAGUNA CANYON ROAD  
City-State-Zip: IRVINE CA 92618

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SAMANTHA CORBAT**MANAGER****07/22/2022**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date