Entity Name: USCOFW 4035 SOUTHPOINT BLVD LLC

## Current Principal Place of Business:

730 THIRD AVENUE
NEW YORK, NY 10017

## Current Mailing Address:

730 THIRD AVENUE
NEW YORK, NY 10017 US

## FEI Number: 87-1292114

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
Authorized Person(s) Detail :

| Title | ASSISTANT SECRETARY | Title | AP |
| :--- | :--- | :--- | :--- |
| Name | WEINDLING, FRANCESCA | Name | LI, PATRICK |
| Address | 730 THIRD AVENUE | Address | 730 THIRD AVENUE |
| City-State-Zip: | NEW YORK NY 10017 | City-State-Zip: | NEW YORK NY 10017 |
| Title | ASSISTANT SECRETARY | Title | AP |
| Name | HENDERSON, WENDY | Name | BARKER, DERRECK |
| Address | 8500 ANDREW CARNEGIE BLVD | Address | 4675 MACARTHUR COURT STE 1100 |
| City-State-Zip: | CHARLOTTE NC 28215 | City-State-Zip: | NEW PORT BCH CA 92660 |
| Title | MANAGER | Title | AUTHORIZED PERSON |
| Name | NUVEEN ALTERNATIVES ADVISORS | Name | BENEDETTO, MARY CATHERINE |
| Address | LLC | A30 THIRD AVENUE | City-State-Zip: |

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[^0]:    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.

