## ATTACHMENT 15C: TYPE OF OWNERSHIP ENTITY – LIMITED LIABILITY COMPANY (Submit pages of the applicable attachment and the Ownership Organizational Chart for which information has been provided. Blank pages should not be uploaded in THOMAS.)

## NAME OF OWNERSHIP ENTITY:

1. Provide all of the following information for <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>all</u> <u>managers/officers</u> of the Ownership Entity (*complete 2.A. if any member and/or manager identified below is a partnership; complete 2.B. if any member and/or manager identified below is a corporation and/or complete 2.C. if any member and/or manager identified below is a limited liability company*). (*attach additional pages if needed to provide complete information.*)

GOVERNORS/DIRECTORS	MEMBERS Indicate the Managing Member(s), if any	MANAGERS/OFFICERS Indicate the Chief Manager(s), if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	_ Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name:	Telenhaus New	Talanhana Na
Address:	_ Telephone No.:	Telephone No.:
	- Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
Indicate if the LLC listed above is: $\Box$ M	/ 1ember Managed 📮 Manager Managed	 d □ Board

(i)	Name of General Par	rtner:	
	Address:		
	Telephone: (	)Ownership:%	
	Type of entity:	□ individual □ partnership ( <i>complete 3.A.(i) below</i> )	
		□ corporation ( <i>complete 3A.(ii</i> ) below)	
		□ limited liability company ( <i>complete 3.A.(iii) below</i> )	
	State of Formation:		
(ii)	Name of General Par	rtner:	
	Address:		
	Telephone: (	)Ownership:%	
	Type of entity:	□ individual □ partnership ( <i>complete 3.A.(i) below</i> )	
		□ corporation ( <i>complete 3A.(ii</i> ) below)	
		□ limited liability company ( <i>complete 3.A.(iii) below</i> )	
	State of Formation:		
iii)	Name of General Par	rtner:	
	Address:		
	Telephone: (	)Ownership:%	
	Type of entity:	□ individual □ partnership ( <i>complete 3.A.(i) below</i> )	
		□ corporation ( <i>complete 3A.(ii</i> ) below)	
		□ limited liability company ( <i>complete 3.A.(iii) below</i> )	
	State of Formation:		

2. B. If any member and/or manager identified in 1. above is itself a corporation, provide all of the following information for <u>each</u> <u>of the following</u>: (i) <u>all officers</u>, (ii) <u>all directors</u> and (iii) <u>all stockholders with a 10% interest or more</u> in each member and/or manager identified as a corporation in 1. (*complete 3.B.(i) if any officer, director and/or stockholder identified below is a partnership; complete 3.B.(ii) if any officer, director and/or stockholder identified below is a corporation and/or complete 3.B.(iii) if any officer, director and/or stockholder identified below is a limited liability company*). (*attach additional pages if needed to provide complete information.*)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
NT	Name:	Telephone No.:
Name:	Address:	
Title:		Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
Name:	Name:	
Title:	Address:	Telephone No.:
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:
		Telephone No.:

2.	C.	If any member and/or manager identified in 1. above is itself a limited liability company, provide all of the following information
		for each of the following: (i) all governors/directors, (ii) all members and (iii) all managers/officers of each member and/or
		manager identified below as a limited liability company in 1. (complete 3.C.(i) if any member and/or manager identified below
		is a partnership; complete 3.C.(ii) if any member and/or manager identified below is a corporation and/or complete 3.C.(iii)
		if any member and/or manager identified below is a limited liability company). (attach additional pages if needed to provide
		complete information.)

GOVERNORS/DIRECTORS	MEMBERS Indicate the Managing Member(s), if any	MANAGERS/OFFICERS Indicate the Chief Manager(s), if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name:	Telephone No.:	
Address:		
	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	
		Telephone No.:
Indicate if the LLC listed above is	s: 🗖 Member Managed 🗖 Manager	Managed D Board

A. (i)	fol par bas	ny general partner identified in 2.A. above is itself a partnership llowing information for <u>each general partner</u> of any general partner identified below is not an individual or a corporation you n sed on the type of entity, until only individuals and no entitie <i>ovide complete information</i> .)	artner identified as a partnership in 2.A. If any nust provide additional information, in the relevant
	a.	Name of General Partner:	
		Address:	
		Telephone: ()Own	ership:%
		Type of entity: $\Box$ individual $\Box$ partnership $\Box$ of	corporation 🛛 limited liability company
		State of Formation:	
	b.	Name of General Partner:	
		Address:	
		Telephone: ()_Owner	rship:%
		Type of entity: $\Box$ individual $\Box$ partnership $\Box$ of	corporation
		State of Formation:	
	c.	Name of General Partner:	
		Address:	
		Telephone: ()Owne	ership:%
		Type of entity: $\Box$ individual $\Box$ partnership $\Box$ of	corporation 🛛 limited liability company
		State of Formation:	

3. A. (ii) If any general partner identified in 2.A. above is itself a corporation, provide all of the following information for <u>each of</u> <u>the following</u>: (i) <u>all officers</u>, (ii) <u>all directors</u> and (iii) <u>all stockholders with a 10% interest or more</u> in any general partner identified as a corporation in 2.A. If any officer, director of stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
Name:	Name:	Telephone No.:
Title:	Address:	Name:
Address:	Telephone No.:	Type of Entity:
T 11		State of Formation:
Telephone No.:		Address:
Name:	Name:	
Title:	Address:	Telephone No.:
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:
		Telephone No.:

3. A. (iii) If any general partner identified in 2.A. above is itself a limited liability company, provide all of the following information for <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>all managers/officers</u> of any general partner identified as a limited liability company in 2.A. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

GOVERNORS/DIRECTORS	MEMBERS Indicate the Managing Member(s), if any	MANAGERS/OFFICERS Indicate the Chief Manager(s), if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name:	Telephone No.:	Telephone No.:
	- Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
Indicate if the LLC listed above i	s: 🗖 Member Managed 🗖 Manager	Managed 🗖 Board

a.	Name of General Partner:		
	Address:		
	Telephone: ()	Ownership:	0%
	Type of entity: $\Box$ individual $\Box$ partnership	□ corporation	□ limited liability company
	State of Formation:		
b.	Name of General Partner:		
	Address:		
	Telephone: ()	Ownership:	0%
	Type of entity: $\Box$ individual $\Box$ partnership	□ corporation	□ limited liability company
	State of Formation:		
c.	Name of General Partner:		
	Address:		
	Telephone: ()	_Ownership:	0%
	Type of entity: $\Box$ individual $\Box$ partnership	□ corporation	Limited liability company
	State of Formation:		

3. B. (ii) If any officer, director and/or stockholder identified in 2.B. above is itself a corporation, provide all of the following information for <u>each of the following</u>: (i) <u>all officers</u>, (ii) <u>all directors</u> and (iii) <u>all stockholders with a 10% interest or more</u> in any officer, director and/or stockholder identified as a corporation in 2.B. If any officer, director or stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
Name:	Name:	Telephone No.:
	Address:	
Title:		Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
Name:	Name:	
	Address:	Telephone No.:
Title:		
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:
		Telephone No.:

3. B. (iii) If any officer, director and/or stockholder identified in 2.B. above is itself a limited liability company, provide all of the following information for <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>all managers/officers</u> of any officer, director and/or stockholder identified as a limited liability company identified in 2.B. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

	MEMBERS Indicate the Managing Member(s), if any	MANAGERS/OFFICERS Indicate the Chief Manager(s), if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:		
	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
dicate if the LLC listed above is:	Member Managed 🛛 Manager Manage	d 🖵 Board

a.	Name of General Partner:
	Address:
	Telephone: ()   Ownership: %
	Type of entity: 🗅 individual 🗅 partnership 🗅 corporation 🕞 limited liability company
	State of Formation:
b.	Name of General Partner:
	Address:
	Telephone: ()   Ownership: %
	Type of entity: $\Box$ individual $\Box$ partnership $\Box$ corporation $\Box$ limited liability company
	State of Formation:
c.	Name of General Partner:
	Address:
	Telephone: ()Ownership:%
	Type of entity: 🗅 individual 🗅 partnership 🗅 corporation 🕒 limited liability company
	State of Formation:
	State of Formation:

3. C. (ii) If any member and/or manager identified in 2.C. above is itself a corporation, provide all of the following information for <u>each of the following</u>: (i) <u>all officers</u>, (ii) <u>all directors</u> and (iii) <u>all stockholders with a 10% interest or more</u> in any member and/or manager identified as a corporation in 2.C. If any officer, director or stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
Name:	Name:	Telephone No.:
Title:	Address:	
		Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
Name:	Name:	
	Address:	Telephone No.:
Title:		
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:
		Telephone No.:

3. C. (iii) If any member and/or manager identified in 2.C. above is itself a limited liability company, provide all of the following information for <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>all managers/officers</u> of any member and/or manager identified as a limited liability company in 2.C. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

GOVERNORS/DIRECTORS	MEMBERS Indicate the Managing Member(s), if any	MANAGERS/OFFICERS Indicate the Chief Manager(s), if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name:		
Address:	_ Telephone No.:	Telephone No.:
	– Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
Indicate if the LLC listed above i	s: 🗖 Member Managed 🗖 Manager	