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Limited Liability Company (LLC) Statement of Members

(Government Code Section 84109)

Type or Print in Ink.

Amendment
☐ Check box if an Amendment
10 / 20 / 26
Date qualification threshold met (Month, Day, Year)

Date Stamp

CALIFORNIA FORM 409
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1. LLC Information

LEGAL NAME OF LIMITED LIABILITY COMPANY:	NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER:	PRINCIPAL/RESPONSIBLE OFFICER PHONE #:	PRINCIPAL/RESPONSIBLE OFFICER EMAIL:
Mission Rock Parcel F Owner, L.L.C.	Michael Benner	212-715-0300	KGARRETT@TishmanSpeyer.com

LLC STREET ADDRESS:	CITY:	STATE:	ZIP CODE:	LLC MAILING ADDRESS (IF DIFFERENT):	CITY:	STATE:	ZIP CODE:
45 Rockefeller Plaza	New York	NY	10111				

NAME OF COMMITTEE:	COMMITTEE ID:	COMMITTEE PHONE NUMBER:	COMMITTEE EMAIL ADDRESS:
Mission Rock Parcel A Owner, L.L.C. and affiliated entities		212-715-0300	Samuel.Brown@hklaw.com

COMMITTEE STREET ADDRESS:	CITY:	STATE:	ZIP CODE:	COMMITTEE MAILING ADDRESS (IF DIFFERENT):	CITY:	STATE:	ZIP CODE:
45 Rockefeller Plaza	New York	NY	10111				

2. Members (If any members are other LLCs, further disclosure is required in Part 3.)

FULL NAME	MEMBERSHIP TYPE	DATE(S) OF CAPITAL CONTRIBUTION (ONLY COMPLETE IF MEMBER HAS MET CAPITAL CONTRIBUTION THRESHOLD)	CUMULATIVE CAPITAL CONTRIBUTIONS TO LLC	PERCENTAGE OWNERSHIP INTEREST
Mission Rock Parcel F, Mezz L.L.C.	■ MEMBERSHIP 10% OR GREATER ☐ CAPITAL CONTRIBUTIONS $10,000 OR MORE			100
	☐ MEMBERSHIP 10% OR GREATER ☐ CAPITAL CONTRIBUTIONS $10,000 OR MORE			
	☐ MEMBERSHIP 10% OR GREATER ☐ CAPITAL CONTRIBUTIONS $10,000 OR MORE			
	☐ MEMBERSHIP 10% OR GREATER ☐ CAPITAL CONTRIBUTIONS $10,000 OR MORE			

3. Names of Member LLCs Listed in Part 2

NAME OF LLC LISTED IN PART 2	FULL NAMES OF MEMBERS
Mission Rock Parcel F, Mezz L.L.C.	Mission Rock Parcel F, L.L.C.

4. Verification

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 10/21/2026 (DATE)

By Michael Benner (SIGNATURE)
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Attach additional information on appropriately labeled continuation sheets.

Print Clear