

State of California Secretary of State

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STATEMENT OF INFORMATION

(Limited Liability Company)

Filing Fee \$20.00. If this is an amendment, see instructions. IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME

Cerberus Properties LLC

FILED
Secretary of State
State of California

MAR 1 8 2013

		This Space Fo	or Filing Use Only
File Number and State or Place of Organization			
2. SECRETARY OF STATE FILE NUMBER 201306510351	3. STATE OR PLACE OF ORGANIZ CA	ZATION (If formed outside	e of California)
No Change Statement			
4. If there have been any changes to the information contained State, or no statement of information has been previously file			ornia Secretary of
If there has been no change in any of the information cont State, check the box and proceed to Item 15.	ained in the last Statement of Inform	ation filed with the (California Secretary of
Complete Addresses for the Following (Do not abbreviate the name	me of the city. Items 5 and 7 cannot be	P.O. Boxes.)	
5. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
555 Bryant Street, Suite 400	Palo Alto	CA	94301
6. MAILING ADDRESS OF LLC, IF DIFFERENT THAN ITEM 5	CITY	STATE	ZIP CODE
7. STREET ADDRESS OF CALIFORNIA OFFICE	CITY	STATE	ZIP CODE
555 Bryant Street, Suite 400	Palo Alto	CA	94301
Name and Complete Address of the Chief Executive Officer,	f Any		
8. NAME ADDRESS	CITY	STATE	ZIP CODE
Name and Complete Address of Any Manager or Managers Address of Each Member (Attach additional pages, if necessary.) 9. NAME Vinay Apple 555 By ant Street St	CITY	STATE	ZIP CODE
Address of Each Member (Attach additional pages, if necessary.) 9. NAME Vinay Anne ADDRESS 555 Bryant Street, Su	CITY uite 400 Palo Alto	STATE CA	ZIP CODE 94301
Address of Each Member (Attach additional pages, if necessary.) 9. NAME ADDRESS	CITY	STATE	ZIP CODE
Address of Each Member (Attach additional pages, if necessary.) 9. NAME Vinay Anne ADDRESS 555 Bryant Street, Su	CITY uite 400 Palo Alto	STATE CA	ZIP CODE 94301
Address of Each Member (Attach additional pages, if necessary.) 9. NAME Vinay Anne S55 Bryant Street, St. 10. NAME ADDRESS ADDRESS	CITY Palo Alto CITY CITY must reside in California and Item 13 mi	STATE CA STATE STATE	ZIP CODE 94301 ZIP CODE ZIP CODE
Address of Each Member (Attach additional pages, if necessary.) 9. NAME Vinay Anne 10. NAME ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS Agent for Service of Process If the agent is an individual, the agent P.O. Box is not acceptable. If the agent is a corporation, the agent must	CITY Palo Alto CITY CITY must reside in California and Item 13 mi	STATE CA STATE STATE	ZIP CODE 94301 ZIP CODE ZIP CODE
Address of Each Member (Attach additional pages, if necessary.) 9. NAME Vinay Anne S55 Bryant Street, St. 10. NAME ADDRESS 11. NAME ADDRESS Agent for Service of Process If the agent is an individual, the agent P.O. Box is not acceptable. If the agent is a corporation, the agent must Corporations Code section 1505 and Item 13 must be left blank. 12. NAME OF AGENT FOR SERVICE OF PROCESS	CITY Palo Alto CITY CITY CITY must reside in California and Item 13 mm have on file with the California Secreta	STATE CA STATE STATE	ZIP CODE 94301 ZIP CODE ZIP CODE a California address, a e pursuant to California
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