

FORM LLC

LIMITED LIABILITY COMPANY	Development Name: <u>Riverbend Trace</u> City: <u>Orangeburg</u> , S.C.
Name of LLC: <u>Riverbend Trace, LLC</u> LLC includes the following: ☒ For Profit ☐ Non-Profit Address: <u>PO Box 566</u> City: <u>Greenville</u> State: <u>NC</u> Zip: <u>27835</u> Tax ID Number: _____ or date applied for: <u>TBD, after award</u>	
Membership	Percentage of Ownership
1. Manager (if any): _____ Address: _____ City, State, Zip: _____	_____ %
2. Member Name: <u>Riverbend Trace MM, LLC</u> Address: <u>PO Box 566</u> City, State, Zip: <u>Greenville, NC 27835</u>	<u>0.01</u> %
3. Member Name: <u>Taft-Mills Group, LLC (TBD Future Investor)</u> Address: <u>PO Box 566</u> City, State, Zip: <u>Greenville, NC 27835</u>	<u>99.99</u> %
4. Member Name: _____ Address: _____ City, State, Zip: _____	_____ %
5. Member Name: _____ Address: _____ City, State, Zip: _____	_____ %
6. Member Name: _____ Address: _____ City, State, Zip: _____	_____ %

NOTE: This form must be completed for each LLC that is involved in the proposed development. If any of the Members are Corporations, Limited Liability Companies, or Limited Partnerships then you must also complete, in addition to this form, one or more of the following, as applicable: FORM CORP, FORM LP, and/or FORM LLC. All necessary forms must be submitted so as to ascertain the Principals of the development.

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Name of LLC: <u>Riverbend Trace MM, LLC</u> LLC includes the following: ☒ For Profit ☐ Non-Profit Address: <u>PO Box 566</u> City: <u>Greenville</u> State: <u>NC</u> Zip: <u>27835</u> Tax ID Number: _____ or date applied for: <u>TBD</u>	
Membership	Percentage of Ownership
1. Manager (if any): _____ Address: _____ City, State, Zip: _____	_____ %
2. Member Name: <u>Taft-Mills Group, LLC</u> Address: <u>PO Box 566</u> City, State, Zip: <u>Greenville, NC 27835</u>	<u>100</u> %
3. Member Name: _____ Address: _____ City, State, Zip: _____	_____ %
4. Member Name: _____ Address: _____ City, State, Zip: _____	_____ %
5. Member Name: _____ Address: _____ City, State, Zip: _____	_____ %
6. Member Name: _____ Address: _____ City, State, Zip: _____	_____ %

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FORM LLC

LIMITED LIABILITY COMPANY	Development Name: <u>Riverbend Trace</u> City: <u>Barnwell</u> , S.C.
Name of LLC: <u>Taft-Mills Group, LLC</u> LLC includes the following: ☒ For Profit ☐ Non-Profit Address: <u>PO Box 566</u> City: <u>Greenville</u> State: <u>NC</u> Zip: <u>27835</u> Tax ID Number: <u>81-3018669</u> or date applied for: _____	
Membership	Percentage of Ownership
1. Manager (if any): _____ Address: _____ City, State, Zip: _____	_____ %
2. Member Name: <u>Thomas F. Taft, Jr</u> Address: <u>PO Box 566</u> City, State, Zip: <u>Greenville, NC 27835</u>	<u>34.995</u> %
3. Member Name: <u>Jonathan G. Taft, Jr</u> Address: <u>PO Box 566</u> City, State, Zip: <u>Greenville, NC 27835</u>	<u>34.995</u> %
4. Member Name: <u>Dustin Mills</u> Address: <u>PO Box 566</u> City, State, Zip: <u>Greenville, NC 27835</u>	<u>20</u> %
5. Member Name: <u>C.J. Tyree</u> Address: <u>PO Box 566</u> City, State, Zip: <u>Greenville, NC 27835</u>	<u>10</u> %
6. Member Name: <u>Thomas F. Taft, Sr.</u> Address: <u>PO Box 566</u> City, State, Zip: <u>Greenville, NC 27835</u>	<u>.01</u> %

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