

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015626

Entity Name: IVE HOLDINGS I, LLC**Current Principal Place of Business:**TWO NORTH RIVERSIDE PLAZA, SUITE 800
CHICAGO, IL 60606**Current Mailing Address:**TWO NORTH RIVERSIDE PLAZA, SUITE 800
CHICAGO, IL 60606 US**FEI Number:** 04-3694008**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Date

Authorized Person(s) Detail :

Title EVP, CHIEF LEGAL OFFICER AND
CORPORATE SECRETARY
Name ELDERSVELD, DAVID
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606

Title EVP, CFO, TREASURER
Name SEAVEY, PAUL
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606

Title SENIOR VICE PRESIDENT
Name HATTEL, BRETT
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606

Title SENIOR VICE PRESIDENT
Name MARTIN, STANLEY
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606

Title CEO, PRESIDENT
Name NADER, MARGUERITE
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606

Title SENIOR VICE PRESIDENT
Name BUNCE, RONALD
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606

Title SENIOR VICE PRESIDENT
Name WILKINS, DOUGLAS
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606

Title VP
Name BUTLER II, DONALD EVERRETT
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606

Continues on page 2

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.

SIGNATURE: DAVID ELDERSVELD**CORPORATE
SECRETARY****03/23/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP
Name FORBES, DARRIN
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title VP
Name GREGORY, JOHN
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title VP
Name CLEMMIEY, MONSIE
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606