

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000150052

**Entity Name:** 2401 NW, LLC

**Current Principal Place of Business:**

720 OLIVE STREET STE 2500  
SAINT LOUIS, MO 63101

**Current Mailing Address:**

720 OLIVE STREET STE 2500  
SAINT LOUIS, MO 63101 US

**FEI Number:** 46-5174156

**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 MBR  
Name 2401 NW MBS MEMBER, INC.  
Address 720 OLIVE STREET STE 2500  
City-State-Zip: SAINT LOUIS MO 63101

Title MBR  
Name MBS ILP, INC.  
Address 720 OLIVE STREET STE 2500  
City-State-Zip: SAINT LOUIS MO 63101

*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:** HILLARY B. ZIMMERMAN

VP OF 2401 NW MBS  
MEMBER, INC.

04/11/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date