2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Jan 31, 2024
Secretary of State
4562862657CC

DOCUMENT# L18000098678

Entity Name: CONSOR ENGINEERS, LLC

Current Principal Place of Business:

155 NORTH WACKER DRIVE
SUITE 4150
CHICAGO, IL 60606

Current Mailing Address:

155 NORTH WACKER DRIVE
SUITE 4150
CHICAGO, IL 60606 US

FEI Number: 59-3221706

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH INE 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	MANAGER	Title	MANAGER
Name	PATIL, SANDEEP	Name	RAYASAM, CHRIS
Address	155 NORTH WACKER DRIVE SUITE 4150	Address	155 NORTH WACKER DRIVE SUITE 4150
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	MANAGER	Title	MANAGER
Name	GWILLIAM, SCOTT	Name	GERNANT, ERIK
Address	155 NORTH WACKER DRIVE SUITE 4150	Address	155 NORTH WACKER DRIVE SUITE 4150
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	AMBR	Title	AMBR
Name	RANGASWAMY , GOVINDRAJ	Name	WILLIAMS, WILLIAM
Address	155 NORTH WACKER DRIVE SUITE 4150	Address	155 NORTH WACKER DRIVE SUITE 4150
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	AMBR	Title	AMBR
Name	BOWEN, DAVID	Name	ROWE, JEFFREY
Address	155 NORTH WACKER DRIVE SUITE 4150	Address	155 NORTH WACKER DRIVE SUITE 4150
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606

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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: MATTHEW CASS — SECRETARY-EXECUTIVE DIRECTOR — 01/31/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date

Authorized Person(s) Detail Continued :

Title	AMBR
Name	HARRIS, JEANETTE E.
Address	155 NORTH WACKER DRIVE SUITE 4150
City-State-Zip:	CHICAGO IL 60606

Title	MANAGER
Name	CASS, MATTHEW PAUL
Address	155 NORTH WACKER DRIVE SUITE 4150
City-State-Zip:	CHICAGO IL 60606