

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000151419

Entity Name: BRIDGE AVE KP, LLC

Current Principal Place of Business:

9525 W BRYN MAWR AVE
SUITE 700
ROSEMONT, IL 60018

Current Mailing Address:

9525 W BRYN MAWR AVE
SUITE 700
ROSEMONT, IL 60018 US

FEI Number: 83-0987644

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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	VP	Title	AUTHORIZED REPRESENTATIVE
Name	SIEGEL, NICK	Name	CARROLL, KEVIN
Address	9525 W BRYN MAWR AVE SUITE 700	Address	9525 W BRYN MAWR AVE SUITE 700
City-State-Zip:	ROSEMONT IL 60018	City-State-Zip:	ROSEMONT IL 60018
Title	CEO	Title	PRESIDENT
Name	POULOS, STEVE	Name	PRICCO, ANTHONY
Address	9525 W BRYN MAWR AVE SUITE 700	Address	9525 W BRYN MAWR AVE SUITE 700
City-State-Zip:	ROSEMONT IL 60018	City-State-Zip:	ROSEMONT IL 60018
Title	VP	Title	VP
Name	GROETSEMA, STEVE	Name	ZASCHE, SEAN
Address	9525 W BRYN MAWR AVE SUITE 700	Address	9525 W BRYN MAWR AVE SUITE 700
City-State-Zip:	ROSEMONT IL 60018	City-State-Zip:	ROSEMONT IL 60018

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: ANTHONY PRICCO

PRESIDENT

04/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date