

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000376836

**Entity Name:** JOHNSTON 35 LLC

**Current Principal Place of Business:**

1700 PARK ST, SUITE 100  
NAPERVILLE, IL 60563

**Current Mailing Address:**

1700 PARK ST, SUITE 100  
NAPERVILLE, IL 60563 UN

**FEI Number:** 93-2845400

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHANAMOLU, VINOZ MGRM  
3355 SNEED RD  
FORT PIERCE, FL 34945 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 MGRM  
Name SANTHOSHI MATHA GROUP LLC  
Address 1700 PARK ST, SUITE 100  
City-State-Zip: NAPERVILLE IL 60563

Title MGR  
Name KASILINGAM, MURUGESH  
Address 3707 JUNE BREEZE LANE  
City-State-Zip: NAPERVILLE IL 60564

Title MGR  
Name VALLABHANENI, VASU  
Address 1169 S BROCKWAY ST  
City-State-Zip: PALATINE IL 60067

Title MGR  
Name VEERABRAHMHA, SARITHA  
Address 3001 BURLINGTON AVE  
City-State-Zip: LISLE IL 60532

Title MGR  
Name KOMMINENI, SUBBARAMA  
Address 4028 E HASHKNIFE ROAD  
City-State-Zip: PHOENIX AZ 85050

Title MGR  
Name SURIBHOTLA, VENKATA SIVA S  
Address 1761 TREVINO CIR  
City-State-Zip: BOLINGBROOK IL 60490

*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:** VINOZ CHANAMOLU

MGMBR

01/23/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date