2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003139

Entity Name: SIRVA RELOCATION CREDIT, LLC

Current Principal Place of Business:

17W 110 22ND STREET SUITE 400 OAKBROOK TERRACE, IL 60181

Current Mailing Address:

PO BOX 988 FORT WAYNE, IN 46801

FEI Number: 30-0144740

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US FILED May 01, 2017 Secretary of State CC7111102398

Date

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

	Title	MGR	Title	MGR
	Name	BILOTTA, FRANK	Name	MARGOLIS, JEFFREY H
	Address	17W 110 22ND STREET SUITE 400	Address City-State-Zip:	6200 OAK TREE BLVD
	City-State-Zip:	OAKBROOK TERRACE IL 60181		INDEPENDENCE OH 44131
	Title	MGR OBERDORF, THOMAS	Title	MANAGER
			Name	RUDOLPH, JANINE E
	Name		Address	5001 US HIGHWAY 30 WEST
	Address	17W 110 22ND STREET SUITE 400	City-State-Zip:	FORT WAYNE IN 46818
	City-State-Zip:	OAKBROOK TERRACE IL 60181	Title	TREASURER
	Title	ASST. SECRETARY	Name	GIBSON, JOHN
	Name	BUTLER, KEVIN	Address	5001 U.S. HIGHWAY 30 WEST
	Address	6200 OAK TREE BLVD.	City-State-Zip:	FORT WAYNE IN 46818
	City-State-Zip:	INDEPENDENCE OH 44131		

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: JANINE E. RUDOLPH

ASSISTANT SECRETARY 05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date