## 2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000168

Entity Name: ICON IPV ALLAGASH FLORIDA OWNER POOL 5 SOUTH FL,

LLC

# **Current Principal Place of Business:**

TWO NORTH RIVERSIDE PLAZA **SUITE 2350** CHICAGO, IL 60606

# **Current Mailing Address:**

TWO NORTH RIVERSIDE PLAZA **SUITE 2350** CHICAGO, IL 60606 US

FEI Number: 81-0591197 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

**FILED** Apr 21, 2016

**Secretary of State** 

CC2928896290

# Authorized Person(s) Detail:

**AUTHORIZED MEMBER** Title

ICON MEZZ POOL 5 SOUTH FL, LLC Name TWO NORTH RIVERSIDE PLAZA Address

**SUITE 2350** 

City-State-Zip: CHICAGO IL 60606

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: MICHELLE LAPELLE

Electronic Signature of Signing Authorized Person(s) Detail

ASSISTANT SECRETARY

04/21/2016

Date