

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000000688

**Entity Name:** EBKT ZOC, LLC

**Current Principal Place of Business:**

C/O CARTER LEDYARD & MILBURN  
2 WALL STREET ATTN: L. OHLIGER  
NEW YORK, NY 10005

**Current Mailing Address:**

C/O CARTER LEDYARD & MILBURN  
2 WALL STREET ATTN: L. OHLIGER  
NEW YORK, NY 10005 US

**FEI Number:** 08-6223964

**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

**Authorized Person(s) Detail :**

Title MGR  
Name OHLIGER, LEE A  
Address 2 WALL STREET  
City-State-Zip: NEW YORK NY 10005

Title MGRM  
Name EMILY B. KIRBY STEPHEN F.  
LAPPERT TRUSTEES  
Address 2000 GREENBRIAR LANE  
City-State-Zip: RIVERWOODS IL 60015

Title MANAGER  
Name KIRBY, NATHANIEL B  
Address 474 S WOLF  
City-State-Zip: WHEELING IL 60090

*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:** NATHANIEL KIRBY

**MANAGER**

**04/19/2016**

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

\_\_\_\_\_  
Date