#### **2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000005002

Entity Name: INDUSTRIAL NORTH AMERICAN PROPERTIES III, LLC

**FILED** Apr 21, 2021 **Secretary of State** 7344255594CC

## **Current Principal Place of Business:**

1801 HERMITAGE BOULEVARD SUITE 100

TALLAHASSEE, FL 32308

### **Current Mailing Address:**

191 N WACKER DRIVE **SUITE 2500** CHICAGO, IL 60606 US

FEI Number: 27-1529518 Certificate of Status Desired: No

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

C T 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:

Title

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title VS Title VAS

Name MCCARTHY, THOMAS D Name BONINO, JOHN

Address 191 N WACKER DRIVE, SUITE 2500 Address 191 N WACKER DRIVE, SUITE 2500

CHICAGO IL 60606 City-State-Zip: CHICAGO IL 60606 City-State-Zip:

Title Р Title VAS

STAUFFER, JEFF Name TOGNARELLI, MAURY R Name

191 N WACKER DRIVE, SUITE 2500 Address 1801 HERMITAGE BLVD Address

SUITE 100

City-State-Zip: CHICAGO IL 60606 City-State-Zip: TALLAHASSEE FL 32308

Title VAS

VT Name GRAY, LYNNE M

CHRISTENSEN, LAWRENCE J Name Address 1801 HERMITAGE BLVD

Address 191 N WACKER DRIVE, SUITE 2500 SUITE 100

City-State-Zip: TALLAHASSEE FL 32308 City-State-Zip: CHICAGO IL 60606

Title VAS Title **MANAGER** 

KELLY, THOMAS P Name Name NALI PORTFOLIO LLC Address 191 N WACKER DRIVE Address

1801 HERMITAGE BOULEVARD

**SUITE 2500** SUITE 100

City-State-Zip: CHICAGO IL 60606 TALLAHASSEE FL 32308 City-State-Zip:

## Continues on page 2

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.

04/21/2021 VICE PRESIDENT SIGNATURE: JOHN BONINO

# **Authorized Person(s) Detail Continued:**

Title VAS

Name FAWCETT, DWIGHT P 191 N WACKER DRIVE SUITE 2500 Address

City-State-Zip: CHICAGO IL 60606