

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1100006206

**Entity Name:** NORTH OAK PARTNERS, LLC

**Current Principal Place of Business:**

5702 DOVER DRIVE  
LISLE, IL 60532

**Current Mailing Address:**

5702 DOVER DRIVE  
LISLE, IL 60532

**FEI Number:** 26-4703897

**Certificate of Status Desired:** No

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

BUSINESS FILINGS INCORPORATED  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name DUBAN, JOHN  
Address 5702 DOVER DRIVE  
City-State-Zip: LISLE IL 60532

Title MGRM  
Name DUBAN, MARK-EUGENE  
Address 3299 STRATFORD COURT NO, 3C  
City-State-Zip: LAKE BLUFF IL 60444

Title MGRM  
Name SHAKOOR, CHRISTINA H  
Address 10206 CHARTER RIDGE STREET  
City-State-Zip: SAN ANTONIO TX 78230

Title MGRM  
Name DUBAN, JAMES  
Address 204 E MAIN ST, PO BOX 704  
City-State-Zip: ROCHESTER IL 62563

Title MGRM  
Name DUBAN, MATTHEW E  
Address 14705 MONDOUBLEAU LANE  
City-State-Zip: FLORISSANT MO 63034

*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:** JAMES P.E. DUBAN

**MEMBER, NORTH OAK  
PARTNERS, LLC**

**03/19/2016**

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

\_\_\_\_\_  
Date