2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2016
Secretary of State
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Entity Name: FORSALEBYOWNER.COM REFERRAL SERVICES, LLC

Current Principal Place of Business:

435 NORTH MICHIGAN AVENUE
CHICAGO, IL 60611

Current Mailing Address:

435 NORTH MICHIGAN AVENUE
CHICAGO, IL 60611

FEI Number: 26-2909205

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	MANAGER
Name	KEYSER, SHEILA
Address	435 NORTH MICHIGAN AVENUE
City-State-Zip:	CHICAGO IL 60611

Title	MANAGER
Name	MORGAN, DEREK
Address	435 NORTH MICHIGAN AVENUE
City-State-Zip:	CHICAGO IL 60611

Title	SECRETARY
Name	XANDERS, JULIE K.
Address	435 NORTH MICHIGAN AVENUE
City-State-Zip:	CHICAGO IL 60611

Title	ASST. SECRETARY
Name	MARQUEZ, REBECCA K.
Address	435 NORTH MICHIGAN AVENUE
City-State-Zip:	CHICAGO IL 60611

Title	ASST. TREASURER
Name	KOLLMAN, MICHAEL
Address	435 NORTH MICHIGAN AVENUE
City-State-Zip:	CHICAGO IL 60611

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: JULIE K. XANDERS SECRETARY 04/20/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date