

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000007870

**Entity Name:** GV BUENA VISTA PALACE OWNER, LLC**Current Principal Place of Business:**900 NORTH MICHIGAN AVENUE  
SUITE 1400  
CHICAGO, IL 60611**Current Mailing Address:**900 NORTH MICHIGAN AVENUE  
SUITE 1400  
CHICAGO, IL 60611 US**FEI Number:** 35-2517455**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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MBR	Title	AUTHORIZED REPRESENTATIVE
Name	GV BUENA VISTA INVESTOR, LLC	Name	EWING, KAREN M
Address	900 NORTH MICHIGAN AVENUE SUITE 1400	Address	900 NORTH MICHIGAN AVENUE SUITE 1400
City-State-Zip:	CHICAGO IL 60611	City-State-Zip:	CHICAGO IL 60611
Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED REPRESENTATIVE
Name	HELLEBUSCH, LOUIS D	Name	ROMICK, JONATHAN
Address	900 NORTH MICHIGAN AVENUE SUITE 1400	Address	900 NORTH MICHIGAN AVENUE SUITE 1400
City-State-Zip:	CHICAGO IL 60611	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:** KAREN M EWING**AUTHORIZED  
REPRESENTATIVE****03/29/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date