

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000005463

**Entity Name:** WEST MONROE PARTNERS, LLC

**Current Principal Place of Business:**

311 WEST MONROE 14TH FLOOR  
CHICAGO, IL 60606

**Current Mailing Address:**

311 WEST MONROE 14TH FLOOR  
CHICAGO, IL 60606 US

**FEI Number: 75-3043995**

**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           ARMSTRONG, DOUGLAS  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606

Title           MANAGER  
Name           MERMELSTEIN, GIL  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606

Title           MANAGER  
Name           MCCARTY, KEVIN  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606

Title           MANAGER  
Name           STELTER, SUSAN  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606

Title           MANAGER  
Name           BOLGER, TOM  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606

Title           MANAGER  
Name           HULSEBOSCH, TOM  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606

Title           MANAGER  
Name           BENNETT, BARB  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606

Title           MANAGER  
Name           DUGANIER, BARBARA  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606

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*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: BARB BENNETT**

**MANAGER**

**03/06/2023**

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

\_\_\_\_\_  
Date

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

Title           MANAGER  
Name           GHALAYINI, MAZEN  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606

Title           MANAGING MEMBER  
Name           WEST MONROEE PARTNERS, INC  
Address        311 WEST MONROE 14TH FLOOR  
City-State-Zip: CHICAGO IL 60606