

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000005198

Entity Name: MCI OPCO, LLC**Current Principal Place of Business:**1801 N MILITARY TRIAL, SUITE 200
BOCA RATON, FL 33431**Current Mailing Address:**1801 N MILITARY TRIAL, SUITE 200
BOCA RATON, FL 33431 US**FEI Number:** 45-4663877**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	MANAGER, DIRECTOR
Name	GOLDMAN, ROBERT DR
Address	1801 N MILITARY TRIAL, SUITE 200
City-State-Zip:	BOCA RATON FL 33431

Title	MANAGER, DIRECTOR
Name	KLATZ, RONALD DR
Address	1801 N MILITARY TRIAL, SUITE 200
City-State-Zip:	BOCA RATON FL 33431

Title	MANAGER, DIRECTOR
Name	PENNINGTON, MARK
Address	1801 N MILITARY TRIAL, SUITE 200
City-State-Zip:	BOCA RATON FL 33431

Title	MANAGER, DIRECTOR
Name	KROGULSKI, STEPHEN
Address	175 N PATRICK BLVD, SUITE 180
City-State-Zip:	BROOKFIELD WI 53045

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: STEPHEN KROGULSKI

MANAGER

03/11/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date