#### DOCUMENT# M2100006588

Entity Name: 111 REMARKETING, LLC

### **Current Principal Place of Business:**

11299 NORTH ILLINOIS STREET CARMEL, IN 46032

## **Current Mailing Address:**

11299 NORTH ILLINOIS STREET CARMEL, IN 46032 US

# FEI Number: 83-1089446

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US FILED Apr 19, 2022 Secretary of State 0943894909CC

Certificate of Status Desired: No

SSEE, 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

# Authorized Person(s) Detail :

| Title           | MANAGER                     | Title           | MANAGER                     |
|-----------------|-----------------------------|-----------------|-----------------------------|
| Name            | LIPS, PAUL J.               | Name            | HAMMER, JOHN C.             |
| Address         | 11299 NORTH ILLINOIS STREET | Address         | 11299 NORTH ILLINOIS STREET |
| City-State-Zip: | CARMEL IN 46032             | City-State-Zip: | CARMEL IN 46032             |
|                 |                             |                 |                             |
| Title           | MEMBER                      |                 |                             |
| Name            | ADESA, INC.                 |                 |                             |
| Address         | 11299 NORTH ILLINOIS STREET |                 |                             |
| City-State-Zip: | CARMEL IN 46032             |                 |                             |
| Address         | 11299 NORTH ILLINOIS STREET |                 |                             |

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: PAUL J. LIPS

MANAGER

#### 04/19/2022

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date