

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000021469

**Entity Name:** WEST WACKER VENTURE PARTNERS, LLC

**Current Principal Place of Business:**

181 W MADISON  
SUITE 4700  
CHICAGO, IL 60602

**Current Mailing Address:**

181 W MADISON  
SUITE 4700  
CHICAGO, IL 60602 US

**FEI Number:** 20-4399680

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
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 MGR  
Name GARCIA-HUIDOBRO, CRISTOBAL  
Address 181 W MADISON  
SUITE 4700  
City-State-Zip: CHICAGO IL 60602

Title MGR  
Name SAFIAN, RODRIGO ARZE  
Address 181 W MADISON  
SUITE 4700  
City-State-Zip: CHICAGO IL 60602

Title MGR  
Name ESCOBAR, MARIANA  
Address 181 W MADISON  
SUITE 4700  
City-State-Zip: CHICAGO IL 60602

*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:** CRISTOBAL GARCIA-HUIDOBRO

**MANAGER**

**03/05/2015**

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

\_\_\_\_\_  
Date