

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000097912

Entity Name: CONSOR EQUIPMENT, LLC**Current Principal Place of Business:**155 N WACKER DR.,
SUITE 4150
CHICAGO, IL 60606**Current Mailing Address:**155 N WACKER DR.,
SUITE 4150
CHICAGO, IL 60606 US**FEI Number:** 59-3352901**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
Name RAYASAM, CHRIS
Address 155 N WACKER DR.,
SUITE 4150
City-State-Zip: CHICAGO IL 60606

Title MANAGER
Name GWILLIAM, SCOTT
Address 155 N WACKER DR.,
SUITE 4150
City-State-Zip: CHICAGO IL 60606

Title MANAGER
Name PATIL, SANDEEP N
Address 155 N WACKER DR.,
SUITE 4150
City-State-Zip: CHICAGO IL 60606

Title MANAGER
Name GERNANT, ERIK
Address 155 N WACKER DR.,
SUITE 4150
City-State-Zip: CHICAGO IL 60606

Title MANAGER
Name SCHWARTZ, ZINA
Address 155 N WACKER DR.,
SUITE 4150
City-State-Zip: CHICAGO IL 60606

Title MANAGER
Name RANGASWAMY, GOVINDRAJ
MAVANUR
Address 155 N WACKER DR.,
SUITE 4150
City-State-Zip: CHICAGO IL 60606

Title MANAGER
Name SHIMANEK, MINDY
Address 155 N WACKER DR.,
SUITE 4150
City-State-Zip: CHICAGO IL 60606

Title SECRETARY
Name CASS, MATTHEW PAUL
Address 155 N WACKER DR.,
SUITE 4150
City-State-Zip: CHICAGO IL 60606

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: MATTHEW PAUL CASS**SECRETARY****01/16/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date