2022 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M02000000268

Entity Name: CAREFREE COVE LLC

Current Principal Place of Business:

TWO N. RIVERSIDE PLAZA, SUITE 800

CHICAGO, IL 60606

Current Mailing Address:

TWO N. RIVERSIDE PLAZA, SUITE 800 CHICAGO, IL 60606

FEI Number: 03-0377904 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:

Name

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MEMBER Title EXECUTIVE VICE PRESIDENT,

MHC OPERATING LIMITED GENERAL COUNSEL AND CORPORATE SECRETARY

FILED Jun 27, 2022

Secretary of State 9780060484CC

PARTNERSHIP

Name

ELDERSVELD, DAVID

Address TWO N. RIVERSIDE PLAZA, SUITE 800 Address TWO NORTH RIVERSIDE PLAZA.

City-State-Zip: CHICAGO IL 60606 SUITE 800

City-State-Zip: CHICAGO IL 60606

Title VP

City-State-Zip:

CHICAGO IL 60606

Name FORBES, DARRIN Title VP

Address TWO N. RIVERSIDE PLAZA, SUITE 800 Name BUTLER, DONALD EVERRETT II

Address TWO N. RIVERSIDE PLAZA, SUITE 800

City-State-Zip: CHICAGO IL 60606

City-State-Zip: CHICAGO IL 60606

Title SENIOR VICE PRESIDENT

Name MARTIN, STANLEY Title SENIOR VICE PRESIDENT

Address TWO N. RIVERSIDE PLAZA, SUITE 800 Name WILKINS, DOUGLAS

Address TWO N. RIVERSIDE PLAZA, SUITE 800

City-State-Zip: CHICAGO IL 60606

City-State-Zip: CHICAGO IL 60606

Title SENIOR VICE PRESIDENT

Name HATTEL, BRETT Title SENIOR VICE PRESIDENT

Address TWO N. RIVERSIDE PLAZA, SUITE 800 Name BUNCE, RONALD

Address TWO N. RIVERSIDE PLAZA, SUITE 800

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.

that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID ELDERSVELD

EVP, CHIEF LEGAL

06/27/2022

OFFICER AND CORPORATE SECRETARY

Authorized Person(s) Detail Continued:

TitleEVP, CFOTitleCEO, PRESIDENTNameSEAVEY, PAULNameNADER, MARGUERITE

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