

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 14, 2016
Secretary of State
CC4467640591

Entity Name: COVERIS KEY HOLDINGS LLC

Current Principal Place of Business:

8600 W. BRYN MAWR AVENUE, SUITE 800N
CHICAGO, IL 60631

Current Mailing Address:

8600 W. BRYN MAWR AVENUE, SUITE 800N
CHICAGO, IL 60631 US

FEI Number: 20-3578508

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 TREASURER
Name OWENS, DUANE
Address 50 INTERNATIONAL DRIVE
 SUITE 100
City-State-Zip: GREENVILLE SC 29615

Title VP TAX & ASST. SECRETARY
Name COSTIGAN, THOMAS
Address 50 INTERNATIONAL DRIVE
 SUITE 100
City-State-Zip: GREENVILLE SC 29615

Title MANAGER, VP, CFO
Name ALGER, MICHAEL E
Address 8600 W. BRYN MAWR AVENUE, SUITE
 800N
City-State-Zip: CHICAGO IL 60631

Title MANAGER, VP, GENERAL COUNSEL
 AND SECRETARY
Name MCJOHN, KATHLEEN
Address 8600 W. BRYN MAWR AVENUE, SUITE
 800N
City-State-Zip: CHICAGO IL 60631

Title MANAGER, CEO, PRESIDENT
Name MASSE, GARY A
Address 8600 W BRYN MAWR AVE, SUITE
 800N
City-State-Zip: CHICAGO IL 60631

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: KATHLEEN MCJOHN

SECRETARY

04/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date