## 2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000001121

## Entity Name: EQUITY RESIDENTIAL SERVICES II, LLC

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

TWO NORTH RIVERSIDE PLAZA, SUITE 400 CHICAGO, IL 60606

# **Current Mailing Address:**

TWO NORTH RIVERSIDE PLAZA, SUITE 400 CHICAGO, IL 60606 US

# FEI Number: 26-3822485

# 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

## Authorized Person(s) Detail :

Authonizeu	reison(s) Delan .		
Title	REAL PROPERTY SIGNOR	Title	REAL PROPERTY SIGNOR
Name	WHITE, CYDNEY A.	Name	HIGGINS, TIFFINY
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400	Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	REAL PROPERTY SIGNOR	Title	REAL PROPERTY SIGNOR
Name	HAMMOND, CAROLINE	Name	TRAGER, MARK
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400	Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	REAL PROPERTY SIGNOR	Title	REAL PROPERTY SIGNOR
Name	MAHER, CHRISTOPHER	Name	GARECHANA, ROBERT A.
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400	Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	REAL PROPERTY SIGNOR	Title	REAL PROPERTY
Name	FENSTER, SCOTT J.	Name	GARECHANA, ROBERT A.
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400	Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606

#### Continues on page 2

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: CHRISTOPHER A. MAHER

REAL PROPERTY

04/18/2021

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 18, 2021 Secretary of State 8800954667CC

Date

Certificate of Status Desired: No

# Authorized Person(s) Detail Continued :

Title	REAL PROPERTY	Title	REAL PROPERTY
Name	TRAGER, MARK A.	Name	MAHER, CHRISTOPHER A.
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400	Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400
City-State-Zip:	HICAGO IL 60606	City-State-Zip:	
Title	REAL PROPERTY	Title	MANAGING MEMBER
Name	FENSTER, SCOTT J.	Name	ERP OPERATING LIMITED
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400	Name	PARTNERSHIP
City-State-Zip:	CHICAGO IL 60606	Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400
Title	TAX MATTERS PARTNER	City-State-Zip:	CHICAGO IL 60606
Name	ERP OPERATING LIMITED PARTNERSHIP	Title	REAL PROPERTY
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400	Name	HAMMOND, CAROLINE E.
City-State-Zip:	CHICAGO IL 60606	Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400
Title	REAL PROPERTY	City-State-Zip:	CHICAGO IL 60606
Name	HIGGINS, TIFFINY M.	, ,	
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400	Title	MANAGER
City-State-Zip:	CHICAGO IL 60606	Name	ERP OPERATING LIMITED PARTNERSHIP
		Address	TWO NORTH RIVERSIDE PLAZA, SUITE 400
		City-State-Zip:	CHICAGO IL 60606