

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000004574

Entity Name: MHC CLOVERLEAF, L.L.C.**Current Principal Place of Business:**TWO NORTH RIVERSIDE PLAZA, SUITE 800
CHICAGO, IL 60606**Current Mailing Address:**TWO NORTH RIVERSIDE PLAZA, SUITE 800
CHICAGO, IL 60606**FEI Number:** 45-3342144**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 MEMBER
Name MHC OPERATING LIMITED PARTNERSHIP
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title VP
Name JACCARD, WALTER
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title VP
Name MARTIN, STANLEY
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title VP
Name TAYLOR-RHARBI, LESLIE
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title EXECUTIVE VICE PRESIDENT, GENERAL COUNSEL AND CORPORATE SECRETARY
Name ELDERSVELD, DAVID
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title EXECUTIVE VICE PRESIDENT, CFO AND TREASURER
Name SEAVEY, PAUL
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title CEO, PRESIDENT
Name NADER, MARGUERITE
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title SENIOR VICE PRESIDENT
Name ALMOND, DALE
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
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: DAVID ELDERSVELD

04/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP
Name HUFF, PAUL J
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title VP
Name RUMPF, DAWN
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip: CHICAGO IL 60606

Title VP
Name ZIMMERMAN, ERIC
Address TWO NORTH RIVERSIDE PLAZA,
SUITE 800
City-State-Zip: CHICAGO IL 60606