2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2016
Secretary of State
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Entity Name: HART MIRACLE MARKETPLACE, LLC

Current Principal Place of Business:

C/O HEITMAN CAPITAL MANAGEMENT LLC
191 NORTH WACKER DRIVE, STE. 2500
CHICAGO, IL 60606

Current Mailing Address:

C/O HEITMAN CAPITAL MANAGEMENT LLC
191 NORTH WACKER DRIVE, STE. 2500
CHICAGO, IL 60606 US

FEI Number: 77-0672767

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	MGRM
Name	HEITMAN AMERICA REAL ESTATE HOLDING, L.P.
Address	191 NORTH WACKER DRIVE, SUITE 2500
City-State-Zip:	CHICAGO IL 60606

Title	EVP, SECRETARY
Name	MCCARTHY, THOMAS D
Address	C/O HEITMAN CAPITAL MANAGEMENT LLC 191 NORTH WACKER DRIVE, STE. 2500
City-State-Zip:	CHICAGO IL 60606

Title	SVP
Name	PERISHO, DAVID B
Address	C/O HEITMAN CAPITAL MANAGEMENT LLC 191 NORTH WACKER DRIVE, STE. 2500
City-State-Zip:	CHICAGO IL 60606

Title	PRESIDENT
Name	TOGNARELLI, MAURY R
Address	C/O HEITMAN CAPITAL MANAGEMENT LLC 191 NORTH WACKER DRIVE, STE. 2500
City-State-Zip:	CHICAGO IL 60606

Title	CFO, TREASURER, ASST. SECRETARY
Name	CHRISTENSEN, LAWRENCE J
Address	C/O HEITMAN CAPITAL MANAGEMENT LLC 191 NORTH WACKER DRIVE, STE. 2500
City-State-Zip:	CHICAGO IL 60606

Title	EVP
Name	EDELMAN, HOWARD J
Address	C/O HEITMAN CAPITAL MANAGEMENT LLC 191 NORTH WACKER DRIVE, STE. 2500
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: THOMAS D. MCCARTHY EVP & SECRETARY 04/15/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date