

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000004498

Entity Name: JOIE DE VIVRE HOSPITALITY, LLC

Current Principal Place of Business:

150 N. RIVERSIDE PLAZA
14TH FLOOR, LEGAL DEPARTMENT
CHICAGO, IL 60606

Current Mailing Address:

150 N. RIVERSIDE PLAZA
14TH FLOOR, LEGAL DEPARTMENT
CHICAGO, IL 60606 US

FEI Number: 27-2689706

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 MANAGER, PRESIDENT
Name HOPLAMAZIAN, MARK S.
Address 150 N. RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title VP
Name SEARS, PETER
Address 150 N. RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title VP
Name RILEY, JANET
Address 150 N. RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title SECRETARY
Name PADILLA, ANALISA
Address 150 N. RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title ASST. SECRETARY
Name URBANSKI, CHRISTINA
Address 150 N. RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title MANAGER
Name BOTTARINI, JOAN
Address 150 N. RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title VP
Name GRADY, TRICIA
Address 150 N. RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title VP
Name ROHMAN, ADAM
Address 150 N. RIVERSIDE PLAZA
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.

SIGNATURE: CHRISTINA URBANSKI

ASSISTANT SECRETARY 05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP
Name REPPY, CHAD
Address 150 N. RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title VP, TREASURER
Name JORSKI, HELEN
Address 150 N. RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606