

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000007867

**Entity Name:** INNFLUX, LLC

**Current Principal Place of Business:**

850 W. JACKSON BLVD., SUITE 250  
CHICAGO, IL 60607

**Current Mailing Address:**

1000 HALL OF FAME AVE. #8  
SPRINGFIELD, MA 01105 US

**FEI Number:** 45-3273862

**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            DIRECTOR OF FINANCE  
Name            TORCHIA, MICHELLE  
Address        1000 HALL OF FAME AVE #8  
City-State-Zip: SPRINGFIELD MA 01105

Title            MGR  
Name            O'CONNOR, BRIAN  
Address        850 W. JACKSON BLVD., SUITE 250  
City-State-Zip: CHICAGO IL 60607

*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:** MICHELLE TORCHIA

**DIRECTOR OF FINANCE**

**03/22/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date