2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000003192

Entity Name: RAR2 - ST. JOHNS TOWN CENTER QRS, LLC

FILED
Mar 21, 2024
Secretary of State
6899228733CC

Current Principal Place of Business:

222 SOUTH RIVERSIDE PLAZA 34TH FLOOR CHICAGO, IL 60606

Current Mailing Address:

222 SOUTH RIVERSIDE PLAZA 34TH FLOOR CHICAGO, IL 60606 US

FEI Number: 36-4785419 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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 AUTHORIZED SIGNATORY Title AUTHORIZED SIGNATORY

Name HENDERSON, W. TODD Name LEE, JANICE

Address 222 SOUTH RIVERSIDE PLAZA Address 222 SOUTH RIVERSIDE PLAZA

34TH FLOOR 34TH FLOOR

City-State-Zip: CHICAGO IL 60606 City-State-Zip: CHICAGO IL 60606

Title AUTHORIZED SIGNATORY Title AUTHORIZED SIGNATORY

Name ELLSWORTH, TIMOTHY E. Name LENHERT, JOSHUA

Address 222 SOUTH RIVERSIDE PLAZA Address 222 SOUTH RIVERSIDE PLAZA

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City-State-Zip: CHICAGO IL 60606 City-State-Zip: CHICAGO IL 60606

Title AUTHORIZED SIGNATORY Title AUTHORIZED SIGNATORY

Name MARTIN-HESS, MEGAN A. Name MEHRA, VIKRAM

Address 222 SOUTH RIVERSIDE PLAZA Address 222 SOUTH RIVERSIDE PLAZA

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City-State-Zip: CHICAGO IL 60606 City-State-Zip: CHICAGO IL 60606

Title AUTHORIZED SIGNATORY Title AUTHORIZED SIGNATORY

Name TONEY, JAMES E. Name BENEFIELD, JANE

Address 222 SOUTH RIVERSIDE PLAZA Address 222 SOUTH RIVERSIDE PLAZA

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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: VANESSA LEW AUTHORIZED 03/21/2024 SIGNATORY

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

AUTHORIZED SIGNATORY Title Title **AUTHORIZED SIGNATORY**

LESKE, TIMOTHY Name STRANGE, KRISTIN Name

Address 222 SOUTH RIVERSIDE PLAZA Address 222 SOUTH RIVERSIDE PLAZA

34TH FLOOR 34TH FLOOR

City-State-Zip: CHICAGO IL 60606 City-State-Zip: CHICAGO IL 60606

AUTHORIZED SIGNATORY Title **AUTHORIZED SIGNATORY** Title

Name GEORGE, STEPHEN J. Name LEW, VANESSA

Address 222 SOUTH RIVERSIDE PLAZA Address 222 SOUTH RIVERSIDE PLAZA 34TH FLOOR

34TH FLOOR

CHICAGO IL 60606 CHICAGO IL 60606 City-State-Zip: City-State-Zip:

Title **AUTHORIZED SIGNATORY** Title **AUTHORIZED SIGNATORY**

CAPPELLETTI, JOSEPH S. Name EHLI, JOHN P. Name

Address 222 SOUTH RIVERSIDE PLAZA Address 222 SOUTH RIVERSIDE PLAZA

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