

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1400006793

**Entity Name:** MARCUS SPB, LLC

**Current Principal Place of Business:**

100 E WISCONSIN AVE SUITE 1900  
MILWAUKEE, WI 53202

**Current Mailing Address:**

100 E WISCONSIN AVE SUITE 1900  
MILWAUKEE, WI 53202

**FEI Number:** 47-1666471

**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 SECRETARY  
Name KISSINGER, THOMAS F  
Address 100 E WISCONSIN AVE SUITE 1900  
City-State-Zip: MILWAUKEE WI 53202

Title TREASURER  
Name NEIS, DOUGLAS A  
Address 100 E WISCONSIN AVE SUITE 1900  
City-State-Zip: MILWAUKEE WI 53202

Title PRESIDENT  
Name KISSINGER, THOMAS F  
Address 100 E WISCONSIN AVE SUITE 1900  
City-State-Zip: MILWAUKEE WI 53202

Title ASST. SECRETARY  
Name BARTELT, STEVEN S.  
Address 100 E WISCONSIN AVE SUITE 1900  
City-State-Zip: MILWAUKEE WI 53202

*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 F. KISSINGER

**SECRETARY**

**04/10/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date