

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1900000013

**Entity Name:** ADOLPH KIEFER & ASSOCIATES, LLC

**Current Principal Place of Business:**

903 MORRISSEY DR  
BLOOMINGTON, IL 61701

**Current Mailing Address:**

903 MORRISSEY DR  
BLOOMINGTON, IL 61701 US

**FEI Number:** 45-3914706

**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 MGR  
Name ECK, FREDERICK A  
Address 901 W. JACKSON BLVD, STE. 306  
City-State-Zip: CHICAGO IL 60607

Title MGR  
Name LOPEZ, ROCKY  
Address 4100 APPALACHIAN WAY  
City-State-Zip: KNOXVILE TN 37918

Title MGR  
Name KUNIN, KENNETH C  
Address 4100 APPALACHIAN WAY  
City-State-Zip: KNOXVILLE TN 37918

Title MGR  
Name MUIR, JON  
Address 901 W. JACKSON BLVD, STE. 306  
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:** ROCKY LOPEZ

**MANAGER**

**01/18/2023**

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

\_\_\_\_\_  
Date