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.

CFO

SIGNATURE: NEERAJ KARHADE

Electronic Signature of Signing Authorized Person(s) Detail

# 2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000001680

#### Entity Name: TRANSFORM A&E FACTORY SERVICE LLC

#### **Current Principal Place of Business:**

3333 BEVERLY ROAD HOFFMAN ESTATES. IL 60179

# **Current Mailing Address:**

3333 BEVERLY ROAD HOFFMAN ESTATES. IL 60179 US

# FEI Number: 83-3448277

# 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

### Authorized Person(s) Detail :

Title	MBR	Title	CFO
Name	TRANSFORM SR LLC	Name	KARHADE, NEERAJ
Address	3333 BEVERLY ROAD	Address	3333 BEVERLY ROAD
City-State-Zip:	HOFFMAN ESTATES IL 60179	City-State-Zip:	HOFFMAN ESTATES IL 60179

FILED Apr 04, 2022 Secretary of State 2724801131CC

Date

Certificate of Status Desired: No

04/04/2022 Date