

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000180

Entity Name: VESTA SOLUTIONS, INC.**Current Principal Place of Business:**500 W. MONROE
CHICAGO, IL 60661**Current Mailing Address:**500 W. MONROE
CHICAGO, IL 60661 US**FEI Number:** 95-2580952**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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

Officer/Director Detail :

Title ASSISTANT SECRETARY
Name LIVINGSTON, AMBER J.
Address 500 WEST MONROE STREET
City-State-Zip: CHICAGO IL 60661

Title ASSISTANT SECRETARY, TAX
Name CARLIER, HELEN
Address 500 WEST MONROE STREET
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR OF GLOBAL CASH
MANAGEMENT
Name REBENSTORF, MARK
Address 500 WEST MONROE STREET
City-State-Zip: CHICAGO IL 60661

Title VP, ETHICS AND COMPLIANCE
Name BELL, TERRY
Address 500 WEST MONROE STREET
City-State-Zip: CHICAGO IL 60661

Title CORPORATE VICE PRESIDENT
Name SINCLAIR, ANDREW
Address 500 WEST MONROE STREET
City-State-Zip: CHICAGO IL 60661

Title CEO
Name BONANOTTE, GINO
Address 500 WEST MONROE STREET
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR
Name HACKER, MARK
Address 500 WEST MONROE STREET
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR
Name CARLIER, HELEN
Address 500 WEST MONROE STREET
City-State-Zip: CHICAGO IL 60661

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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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KRISTIN KRUSKA**SECRETARY****03/28/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name KRUSKA, KRISTIN
Address 500 WEST MONROE STREET
City-State-Zip: CHICAGO IL 60661

Title PRESIDENT
Name MOLLOY, JOHN (JACK)
Address 500 W. MONROE
City-State-Zip: CHICAGO IL 60661

Title VICE PRESIDENT AND TREASURER
Name GAZIOGLU, UYGAR
Address 500 W. MONROE
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR
Name PEKOFKSKE, DANIEL
Address 500 W. MONROE
City-State-Zip: CHICAGO IL 60661