

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000111269

**Entity Name:** FASTENATION, LLC

**Current Principal Place of Business:**

1300 BEN FRANKLIN  
UNIT 404  
SARASOTA, FL 34236

**Current Mailing Address:**

1300 BEN FRANKLIN  
UNIT 404  
SARASOTA, FL 34236 US

**FEI Number:** NOT APPLICABLE

**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 MGR  
Name HILLMAN, MAX  
Address 1300 BEN FRANKLIN UNIT 404  
City-State-Zip: SARASOTA FL 34236  
  
Title AUTHORIZED REPRESENTATIVE  
Name BROWN, AMY  
Address 255 E FIFTH ST STE 2400  
City-State-Zip: CINCINNATI OH 45202

Title MGR  
Name HILLMAN, CHERYL  
Address 1300 BEN FRANKLIN UNIT 404  
City-State-Zip: SARASOTA FL 34236

*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:** AMY BROWN

**AUTHORIZED  
REPRESENTATIVE**

**04/08/2016**

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

\_\_\_\_\_  
Date