

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002446

Entity Name: CNH INDUSTRIAL AMERICA LLC**Current Principal Place of Business:**700 STATE ST
RACINE, WI 53404**Current Mailing Address:**C/O CNH TAX DEPT
621 STATE ST
RACINE, WI 53402**FEI Number:** 76-0433811**Certificate of Status Desired:** No**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_____
Date**Authorized Person(s) Detail :**Title MGRM
Name CASE NEW HOLLAND INC.
Address 700 STATE STREET
City-State-Zip: RACINE WI 53404Title MGR
Name TOBIN, RICHARD
Address 700 STATE STREET
City-State-Zip: RACINE WI 53404Title MGR
Name MASSIMILIANO, CHIARA
Address 700 STATE STREET
City-State-Zip: RACINE WI 53404Title MGR
Name ANDREA, PAULIS
Address 700 STATE STREET
City-State-Zip: RACINE WI 53404Title MGR
Name WALL, MICHAEL
Address 700 STATE STREET
City-State-Zip: RACINE WI 53404Title MGR
Name AIDE, RICK
Address 700 STATE STREET
City-State-Zip: RACINE WI 53404Title MGR
Name CIPOLLONE, DOMENICO
Address 700 STATE ST
City-State-Zip: RACINE WI 53404Title MGR
Name KNOLL, LINDA
Address 700 STATE ST
City-State-Zip: RACINE WI 53404**Continues on page 2**

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: RICK AIDE**TAX OFFICER****03/27/2015**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date

Authorized Person(s) Detail Continued :

Title MGR
Name GOING, MICHAEL P
Address 700 STATE ST
City-State-Zip: RACINE WI 53404

Title MGR
Name DE BERNARDI, CARLO
Address 700 STATE ST
City-State-Zip: RACINE WI 53404

Title MGR
Name BECKMANN, THOMAS N
Address 700 STATE ST
City-State-Zip: RACINE WI 53404

Title MGR
Name SHELDRAKE, PATRICK
Address 700 STATE ST
City-State-Zip: RACINE WI 53404

Title MGR
Name KONRATH, RICHARD
Address 700 STATE ST
City-State-Zip: RACINE WI 53404

Title MGR
Name WALKER, JAMES E
Address 700 STATE ST
City-State-Zip: RACINE WI 53404

Title MGR
Name KOICHEVAR, MICHELE N
Address 700 STATE ST
City-State-Zip: RACINE WI 53404