

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001260

Entity Name: ENESCO, LLC

Current Principal Place of Business:

225 WINDSOR DRIVE
ITASCA, IL 60143

Current Mailing Address:

225 WINDSOR DRIVE
ITASCA, IL 60143

FEI Number: 33-1150546

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 MANAGER
Name BOWLES, THOMAS G.
Address 225 WINDSOR DRIVE
City-State-Zip: ITASCA IL 60143

Title MANAGER
Name RAIFFE, BRUCE S.
Address 225 WINDSOR DRIVE
City-State-Zip: ITASCA IL 60143

Title MANAGER
Name DONNER, MICHAEL
Address 800 THIRD AVENUE
 40TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGER
Name HENDON, SETH M.
Address 800 THIRD AVENUE
 40TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGER
Name KELLY, ROBERT J.
Address 800 THIRD AVENUE
 40TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGER
Name O'TOOLE, TERENCE M.
Address 800 THIRD AVENUE
 40TH FLOOR
City-State-Zip: NEW YORK NY 10022

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: THOMAS G. BOWLES

MANAGER

04/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date