

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000005956

**Entity Name:** CARROLL'S, LLC

**Current Principal Place of Business:**

4281 OLD DIXIE HIGHWAY  
HAPEVILLE, GA 30354

**Current Mailing Address:**

4281 OLD DIXIE HIGHWAY  
HAPEVILLE, GA 30354

**FEI Number:** 58-0867357

**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, PRESIDENT  
Name           OLSEN, ERIK R  
Address        4300 TBC WAY  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           CFO, DIRECTOR, TREASURER, EVP  
Name           MILLER, TIMOTHY J  
Address        4300 TBC WAY  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           SECRETARY, SVP  
Name           MACIAK, BRIAN  
Address        4300 TBC WAY  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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:** BRIAN MACIAK

**SECRETARY**

**04/24/2015**

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

\_\_\_\_\_ Date