

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000005067

**Entity Name:** COMPRESSOR PRODUCTS INTERNATIONAL LLC

**Current Principal Place of Business:**

4410 GREENBRIAR DRIVE  
STAFFORD, TX 77477

**Current Mailing Address:**

4410 GREENBRIAR DRIVE  
STAFFORD, TX 77477 US

**FEI Number:** 26-0040341

**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 MANAGER  
Name DRAKE, CHRISTOPHER  
Address 4410 GREENBRIAR DRIVE  
City-State-Zip: STAFFORD TX 77477

Title MANAGER  
Name FAVENESI, WILLIAM A.  
Address 5605 CARNEGIE BLVD.  
SUITE 500  
City-State-Zip: CHARLOTTE NC 28209

Title MANAGER  
Name MCLEAN, ROBERT S.  
Address 5605 CARNEGIE BLVD  
STE 500  
City-State-Zip: CHARLOTTE NC 28209

*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:** ROBERT S. MCLEAN

MANAGER

04/03/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date