

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000002448

Entity Name: DIVERSAPACK, LLC**Current Principal Place of Business:**981 JOSEPH E. LOWERY BOULEVARD
SUITE 100
ATLANTA, GA 30318**Current Mailing Address:**981 JOSEPH E. LOWERY BOULEVARD
SUITE 100
ATLANTA, GA 30318**FEI Number:** 58-2664951**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	MGR
Name	LEE, OLIVER
Address	981 JOSEPH E. LOWERY BOULEVARD, SUITE 100
City-State-Zip:	ATLANTA GA 30318
Title	MGR
Name	KRISTEL, ALAN
Address	6080 JERICHO TURNPIKE, SUITE 101
City-State-Zip:	COMMACK NY 11726
Title	MGR
Name	WACHTEL, WILLIAM
Address	885 SECOND AVENUE, 47TH FLOOR
City-State-Zip:	NEW YORK NY 10017

Title	MGR
Name	KRISTEL, IRA
Address	6080 JERICHO TURNPIKE, SUITE 101
City-State-Zip:	COMMACK NY 11726
Title	MGR
Name	KRISTEL, MINDY
Address	6080 JERICHO TURNPIKE, SUITE 101
City-State-Zip:	COMMACK NY 11726
Title	MGR
Name	YOUNG, ANDREW JR.
Address	885 SECOND AVENUE, 47TH FLOOR
City-State-Zip:	NEW YORK NY 10017

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALAN KRISTEL**MANAGER****04/18/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date