

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000003917

Entity Name: 1-800-PACK-RAT, LLC

Current Principal Place of Business:

11640 NORTH PARK DRIVE
SUITE 200
WAKE FOREST, NC 27587

Current Mailing Address:

11640 NORTH PARK DRIVE
SUITE 200
WAKE FOREST, NC 27587 US

FEI Number: 20-2107163

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 POIRIER, ROBERT
Address 11640 NORTH PARK DRIVE
SUITE 200
City-State-Zip: WAKE FOREST NC 27587

Title MANAGER
Name WEST, JAMES O JR
Address 11640 NORTH PARK DRIVE
SUITE 200
City-State-Zip: WAKE FOREST NC 27587

Title MANAGER
Name GAREL, JOHN
Address 11640 NORTH PARK DRIVE
SUITE 200
City-State-Zip: WAKE FOREST NC 27587

Title MANAGER
Name MURPHY JR. , WENDELL H.
Address 11640 NORTH PARK DRIVE
SUITE 200
City-State-Zip: WAKE FOREST NC 27587

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 POIRIER

MANAGER

03/21/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date