

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000002916

**FILED  
Apr 02, 2016  
Secretary of State  
CC2890389729**

**Entity Name:** BEELINE IMPORT AND SERVICES, LLC

**Current Principal Place of Business:**

1075 PEACHTREE STREET, NE  
SUITE 3250  
ATLANTA, GA 30309

**Current Mailing Address:**

1075 PEACHTREE STREET, NE  
SUITE 3250  
ATLANTA, GA 30309 US

**FEI Number:** 27-1623936

**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           MIKOLAJCZAK, DOMINIQUE  
Address        1075 PEACHTREE STREET, NE  
                  SUITE 3250  
City-State-Zip: ATLANTA GA 30309

Title           MANAGER  
Name           ROBERT, RAFAEL  
Address        1075 PEACHTREE STREET, NE  
                  SUITE 3250  
City-State-Zip: ATLANTA GA 30309

Title           MANAGER  
Name           WILLIAMS, DAVIN  
Address        1075 PEACHTREE STREET, NE  
                  SUITE 3250  
City-State-Zip: ATLANTA GA 30309

*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:** DAVIN WILLIAMS

**MANAGER**

**04/02/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date