2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State
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Entity Name: NATIONAL CONVENIENCE SOLUTIONS, L.L.C.

Current Principal Place of Business:

8001 ASSEMBLY CT 29
LITTLE ROCK, AR 72209

Current Mailing Address:

PO BOX 192918
LITTLE ROCK, AR 72219 US

FEI Number: 45-3329499

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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	MGR
Name	WALLS, JIMMY
Address	PO BOX 192918
City-State-Zip:	LITTLE ROCK AR 72209

Title	MGR
Name	BISEK, CASEY
Address	PO BOX 192918
City-State-Zip:	LITTLE ROCK AR 72209

Title	MGR
Name	BRINDISE, GREG
Address	237 CAMERON ST
City-State-Zip:	SUMMERVILLE SC 29483

Title	CFO
Name	SLOAN, KARLA
Address	PO BOX 192918
City-State-Zip:	LITTLE ROCK AR 72219

Title	MEMBER
Name	GEARY, DAVID
Address	PO BOX 192918
City-State-Zip:	LITTLE ROCK AR 72219

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: KARLA SLOAN CFO 03/08/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date