# that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BEN STAS BY JBM

Electronic Signature of Signing Authorized Person(s) Detail

WARRENDALE, PA 15086

#### **Current Mailing Address:** 181 THORN HILL ROAD

181 THORN HILL ROAD

WARRENDALE, PA 15086 US

#### FEI Number: 80-0909020

#### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

#### Authorized Person(s) Detail :

Title	MANAGER	Title	MGR
Name	KEATING, RONALD C	Name	STAS, BEN
Address	181 THORN HILL ROAD	Address	181 THORN HILL ROAD
City-State-Zip:	WARRENDALE PA 15086	City-State-Zip:	WARRENDALE PA 15086

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

MANAGER

02/19/2016

FILED Feb 19, 2016 Secretary of State CC6477336881

Date

Certificate of Status Desired: No

Date

### 2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1300002724

Entity Name: EVOQUA WATER TECHNOLOGIES LLC

## **Current Principal Place of Business:**