

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000006997

**Entity Name:** TOMAS MAIER DISTRIBUTION LLC

**Current Principal Place of Business:**

50 HARTZ WAY  
SECAUCUS, NJ 07094

**Current Mailing Address:**

50 HARTZ WAY  
SECAUCUS, NJ 07094 US

**FEI Number:** 35-2485818

**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 ASSISTANT SECRETARY  
Name MASTROSTEFANO, PETER  
Address 50 HARTZ WAY  
City-State-Zip: SECAUCUS NJ 07094

Title CONTROLLER  
Name RODRIGUEZ, OSVALDO  
Address 595 MADISON AVENUE  
City-State-Zip: NEW YORK NY

*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:** OSVALDO RODRIGUEZ

**CONTROLLER**

**04/27/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date