

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000007864

Entity Name: GILBARCO MEDIA OUTCAST LLC

Current Principal Place of Business:

5420 WADE PARK BLVD
RALEIGH, NC 27607

Current Mailing Address:

C/O DMA, PO BOX 80600
INDIANAPOLIS, IN 46280 US

FEI Number: 46-4070843

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	Title	ASSISTANT SECRETARY
Name	GILBARCO, INC.	Name	PETRO, CECILE
Address	5420 WADE PARK BLVD	Address	5420 WADE PARK BLVD
City-State-Zip:	RALEIGH NC 27607	City-State-Zip:	RALEIGH NC 27607
Title	PRESIDENT	Title	VP
Name	SAAK, AARON	Name	DISNEY, TOM
Address	5420 WADE PARK BLVD	Address	5420 WADE PARK BLVD
City-State-Zip:	RALEIGH NC 27607	City-State-Zip:	RALEIGH NC 27607
Title	VP	Title	SECRETARY, VP
Name	REYNOLDS, TIM	Name	KAMLET, COURTNEY
Address	5420 WADE PARK BLVD	Address	5420 WADE PARK BLVD
City-State-Zip:	RALEIGH NC 27607	City-State-Zip:	RALEIGH NC 27607

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: CECILE PETRO

ASSISTANT SECRETARY 03/24/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date