

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000008608

Entity Name: AG CONNECTIONS, LLC**Current Principal Place of Business:**1576 KILLDEER TRAIL
MURRAY, KY 42071**Current Mailing Address:**1576 KILLDEER TRAIL
MURRAY, KY 42071 US**FEI Number:** 47-5277168**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 MGR
Name TRIVISVAVAT, PONSI
Address 11055 WAYZATE BLVD
City-State-Zip: MINNETONLA MN 55305

Title MGR
Name DEBORAH, WILLOUGHBY
Address 410 SWING RD
City-State-Zip: GREENSBORO NC 27049

Title VP
Name WILSON, JESS
Address 600 N. ARMSTRONG PLACE
City-State-Zip: BOISE ID 83704

Title TREASURER
Name GRAEF, HENRY
Address 3411 SILVERSIDE ROAD
City-State-Zip: WILMINGTON DE 19810

Title MGR
Name BURDETT, DANIEL
Address 410 SWING RD
City-State-Zip: GREENSBORO NC 27049

Title VP
Name GOMME, STEVE
Address 410 SWING ROAD
City-State-Zip: GREENSBORO NC 27409

Title ASST. SECRETARY
Name QUAIN, CHERYL
Address 3411 SILVERSIDE ROAD
City-State-Zip: WILMINGTON DE 19810

Title ASST. TREASURER
Name NEYLON, THOMAS
Address 3411 SILVERSIDE ROAD
City-State-Zip: WILMINGTON DE 19810

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: THOMAS NEYLON**ASSISTANT TREASURER** 04/11/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date