2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2018
Secretary of State
CC6659481542

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Entity Name: REVLOCAL, LLC

Current Principal Place of Business:

4009 COLUMBUS RD. #222
GRANVILLE, OH 43023

Current Mailing Address:

4009 COLUMBUS ROAD SUITE 222
GRANVILLE, OH 43023 US

FEI Number: 31-1581466

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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	MEMBER
Name	HAWK, MARC C
Address	4009 COLUMBUS RD. #222
City-State-Zip:	GRANVILLE OH 43023

Title	OFFICER
Name	LOWRY, KEVIN
Address	4009 COLUMBUS RD. #222
City-State-Zip:	GRANVILLE OH 43023

Title	MANAGER
Name	SPRINGER, PAM
Address	4009 COLUMBUS RD. #222
City-State-Zip:	GRANVILLE OH 43023

Title	MANAGER
Name	SCHISLER, KURT
Address	4009 COLUMBUS RD. #222
City-State-Zip:	GRANVILLE OH 43023

Title	MANAGER
Name	NICOLOSI, R.J.
Address	4009 COLUMBUS RD. #222
City-State-Zip:	GRANVILLE OH 43023

Title	MANAGER
Name	HAWK, MICHAEL
Address	4009 COLUMBUS RD. #222
City-State-Zip:	GRANVILLE OH 43023

Title	MANAGER
Name	TRAINOR, BILL
Address	4009 COLUMBUS RD. #222
City-State-Zip:	GRANVILLE OH 43023

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: KEVIN LOWRY OFFICER 04/16/2018

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