

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000003001

**Entity Name:** ASPLUNDH BRUSH CONTROL, LLC**Current Principal Place of Business:**708 BLAIR MILL ROAD  
WILLOW GROVE, PA 19090**Current Mailing Address:**708 BLAIR MILL ROAD  
WILLOW GROVE, PA 19090 US**FEI Number:** 23-1491320**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 P/MGR/D  
Name GRAHAM, GEORGE E JR  
Address 708 BLAIR MILL ROAD  
City-State-Zip: WILLOW GROVE PA 19090

Title S-T/MGR  
Name BAUER, BRIAN R  
Address 708 BLAIR MILL ROAD  
City-State-Zip: WILLOW GROVE PA 19090

Title AT/MGR  
Name SIMPSON, RONALD S  
Address 708 BLAIR MILL ROAD  
City-State-Zip: WILLOW GROVE PA 19090

Title D/MGR  
Name ASPLUNDH, SCOTT M  
Address 708 BLAIR MILL ROAD  
City-State-Zip: WILLOW GROVE PA 19090

Title D/MGR  
Name DWYER, JOSEPH P  
Address 708 BLAIR MILL ROAD  
City-State-Zip: WILLOW GROVE PA 19090

*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:** RONALD S SIMPSON

ASST TREASURER

04/06/2018

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