

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000101003

FILED  
Apr 05, 2012  
Secretary of State

**Entity Name:** TUPPERWARE BRANDS LATIN AMERICA HOLDINGS, L.L.C.

**Current Principal Place of Business:**

14901 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

14901 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32837

**New Mailing Address:**

**FEI Number:** 45-3160264

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GOINGS, E V  
Address: 5163 FAIRWAY OAKS DRIVE  
City-St-Zip: WINDERMERE, FL 34786

Title: MGR  
Name: POTESHMAN, MICHAEL S  
Address: 4947 KEENELAND CIRCLE  
City-St-Zip: ORLANDO, FL 32819

Title: MGR  
Name: ROEHLK, THOMAS M  
Address: 1591 DALE AVENUE  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR  
Name: HAJEK, JOSEF  
Address: 8746 CRESTGATE CIRCLE  
City-St-Zip: ORLANDO, FL 32819

Title: MGR  
Name: DAVID, EDWARD R III  
Address: 1407 S. RIVERSIDE DRIVE  
City-St-Zip: INDIALANTIC, FL 32903

Title: MGR  
Name: FRIES, MAUREEN M  
Address: 504 CIMAROSA AVENUE  
City-St-Zip: AUBURNDALE, FL 33823

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JOSEF HAJEK

MGR

04/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date