## 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M04000005354

Mar 20, 2012 Secretary of State

FILED

Entity Name: FLEETCOR TECHNOLOGIES OPERATING COMPANY, LLC

Current Principal Place of Business: New Principal Place of Business:

655 ENGINEERING DR. 5445 TRIANGLE PARKWAY, SUITE 400

SUITE 300 NORCROSS, GA 30092 ÚS NORCROSS, GA 30092 US

Current Mailing Address: New Mailing Address:

1001 SERVICE RD EAST HWY 190 SUITE 200 COVINGTON, LA 70434 US

FEI Number: 20-2008209 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR

Name: CLARK, RONALD F

Address: 5445 TRIANGLE PARKWAY SUITE 400

City-St-Zip: NORCROSS, GA 30092

Title: MGR

Name: CARROLL, JOHN R

Address: 5445 TRIANGLE PARKWAY SUITE 400

City-St-Zip: NORCROSS, GA 30092

Title: MGR

Name: EVANS, BRUCE R

Address: 5445 TRIANGLE PARKWAY SUITE 400

City-St-Zip: NORCROSS, GA 30092

Title: MGR

Name: BERYLSON, JOHN G

Address: 5445 TRIANGLE PARKWAY SUITE 400

City-St-Zip: NORCROSS, GA 30092

Title: MGR

Name: STULL, STEVEN

Address: 5445 TRIANGLE PARKWAY SUITE 400

City-St-Zip: NORCROSS, GA 30092

Title: MGR

Name: MARSCHEL, GLENN W

Address: 5445 TRIANGLE PARKWAY SUITE 400

City-St-Zip: NORCROSS, GA 30092

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 Statues.

SIGNATURE: STEVE PISCIOTTA TRS 03/20/2012

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