

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003033

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Entity Name:** ATLAS COPCO COMPRESSORS LLC

**Current Principal Place of Business:**

1800 OVERVIEW DRIVE  
ROCK HILL, SC 29730

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ATLAS COPCO NORTH AMERICA LLC  
34 MAPLE AVE.  
PINE BROOK, NJ 07058

**New Mailing Address:**

C/O ATLAS COPCO NORTH AMERICA LLC  
7 CAMPUS DRIVE, SUITE 200  
PARSIPPANY, NJ 07054

FEI Number: 04-2700546

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGBM  
Name: ATLAS COPCO NORTH AMERICA LLC  
Address: 7 CAMPUS DRIVE, SUITE 200  
City-St-Zip: PARSIPPANY, NJ 07054

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: JOSEPH AKIN

MEMB

03/27/2012

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