

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000000445

Entity Name: METLIFE ASSOCIATES LLC

Current Principal Place of Business:

13045 TESSON FERRY RD., B1-06
ST. LOUIS, MO 63128

Current Mailing Address:

13045 TESSON FERRY RD.
TAX DEPARTMENT B1-06
ST. LOUIS, MO 63128 US

FEI Number: 13-2862391

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 AT
Name KOEGER, JAMES W
Address 13045 TESSON FERRY RD
City-State-Zip: SAINT LOUIS MO 63128

Title SR. VP
Name O'BRIEN, ELIZABETH A.
Address 700 QUAKER LANE
City-State-Zip: WARWICK RI 02886

Title ASST. TREASURER
Name ASHTON, STEVEN H.
Address 501 ROUTE 22
City-State-Zip: BRIDGEWATER NJ 08807

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: JAMES W. KOEGER

ASST. TREASURER

04/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date