

**2016 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M01000002538

**Entity Name:** BRIDGESTONE RETAIL OPERATIONS, LLC

**Current Principal Place of Business:**

535 MARRIOTT DRIVE  
NASHVILLE, TN 37214

**Current Mailing Address:**

535 MARRIOTT DRIVE  
9TH FLOOR TAX COMPLIANCE  
NASHVILLE, TN 37214 US

**FEI Number:** 62-1867019

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
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:** NRAI SERVICES, INC

11/10/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title DIRECTOR  
Name HIGGINS, THOMAS  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR  
Name BARATTA, JOHN  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR  
Name BLECHA, JAMES  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR  
Name BONDER, AMY  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR  
Name HARMON, DAMIEN  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR  
Name TURNER, ERIC L  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title VP, GENERAL COUNSEL &  
SECRETARY  
Name RANALLO, MICHAEL  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title TREASURER  
Name ANES, JOSE  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

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*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 CROTHERS

**TAX OFFICER**

11/10/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title TAX OFFICER  
Name JAMES, CROTHERS  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title ASSISTANT SECRETARY  
Name HOOKER, MEREDITH  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title ASSISTANT SECRETARY  
Name MCKENZIE, KEN  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title ASSISTANT SECRETARY  
Name NELSON, STEVE  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title ASSISTANT SECRETARY  
Name KIM, RAFFERTY  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title ASSISTANT SECRETARY  
Name BOECHER, GLENDA  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title ASSISTANT SECRETARY  
Name LAN, GINA  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title ASSISTANT SECRETARY  
Name NASH, LESLIE  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214

Title ASSISTANT SECRETARY  
Name ODIER, MARC  
Address 535 MARRIOTT DRIVE  
City-State-Zip: NASHVILLE TN 37214