

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003394

Entity Name: SNAP-ON TOOLS COMPANY, LLC**Current Principal Place of Business:**2801 80TH STREET
KENOSHA, WI 53141-1410**Current Mailing Address:**2801 80TH ST
KENOSHA, WI 53143**FEI Number:** 58-2069671**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	PRESIDENT
Name	KASSOUF, THOMAS
Address	2801 80TH STREET
City-State-Zip:	KENOSHA WI 53141-1410

Title	SECRETARY
Name	SHUR, IRWIN
Address	2801 80TH STREET
City-State-Zip:	KENOSHA WI 53141-1410

Title	SR. VP
Name	PAGLIARI, ALDO
Address	2801 80TH STREET
City-State-Zip:	KENOSHA WI 53141-1410

Title	TREASURER
Name	KOSTRZEWA, JEFFREY F
Address	2801 80TH STREET
City-State-Zip:	KENOSHA WI 53141-1410

Title	VP FINANCE & ACCOUNTING
Name	HAMILTON, ROBERT J
Address	2801 80TH ST
City-State-Zip:	KENOSHA WI 53143

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: JEFFREY F. KOSTRZEWA**TREASURER****01/04/2018**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date