

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000006865

**FILED**  
**Apr 16, 2015**  
**Secretary of State**  
**CC2012815805**

**Entity Name:** 240 CRANDON BOULEVARD, LLC

**Current Principal Place of Business:**

C/O PLATINUM EQUITY, LLC  
360 N CRESCENT DR SOUTH BLDG  
BEVERLY HILLS, CA 90210

**Current Mailing Address:**

C/O PLATINUM EQUITY, LLC  
360 N CRESCENT DR SOUTH BLDG  
BEVERLY HILLS, CA 90210

**FEI Number:** 26-1398569

**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 MGR  
Name SIGLER, MARY ANN  
Address 360 N CRESCENT DR SOUTH BLDG  
City-State-Zip: BEVERLY HILLS CA 90210

Title ASSISTANT SECRETARY  
Name WARD, SALLY A  
Address 360 N CRESCENT DR., SOUTH BLDG.  
City-State-Zip: BEVERLY HILLS CA 90210

Title PRESIDENT AND TREASURER  
Name SIGLER, MARY ANN  
Address C/O PLATINUM EQUITY, LLC  
360 N CRESCENT DR SOUTH BLDG  
City-State-Zip: BEVERLY HILLS CA 90210

Title VICE PRESIDENT AND SECRETARY  
Name KALAWSKI, EVA  
Address C/O PLATINUM EQUITY, LLC  
360 N CRESCENT DR SOUTH BLDG  
City-State-Zip: BEVERLY HILLS CA 90210

Title VP  
Name WYCKOFF, DERIK  
Address C/O PLATINUM EQUITY, LLC  
360 N CRESCENT DR SOUTH BLDG  
City-State-Zip: BEVERLY HILLS CA 90210

Title ASSISTANT TREASURER  
Name WALLOCH, DAWN  
Address C/O PLATINUM EQUITY, LLC  
360 N CRESCENT DR SOUTH BLDG  
City-State-Zip: BEVERLY HILLS CA 90210

*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:** SALLY A. WARD

**ASSISTANT SECRETARY** 04/16/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date