

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000002245

Entity Name: ATLAS COPCO CUSTOMER FINANCE USA LLC

Current Principal Place of Business:

7 CAMPUS DRIVE
SUITE 200
PARSIPPANY, NJ 07054

Current Mailing Address:

7 CAMPUS DRIVE
SUITE 200
PARSIPPANY, NJ 07054

FEI Number: 20-0462866

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 MGRM
Name ATLAS COPCO NORTH AMERICA LLC
Address 7 CAMPUS DRIVE, SUITE 200
City-State-Zip: PARSIPPANY NJ 07054

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: JIM LEVITT

ASST SECRETARY

05/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date