

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000001300

**Entity Name:** AZZ WSI, LLC

**Current Principal Place of Business:**

3100 W. 7TH STREET  
SUITE 500  
FORT WORTH, TX 76107

**Current Mailing Address:**

3100 W. 7TH STREET  
SUITE 500  
FORT WORTH, TX 76107 US

**FEI Number:** 74-3124110

**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            MEMBER  
Name            AZZ SPECIALTY REPAIR AND  
                  OVERALL LLC  
Address        3100 W. 7TH STREET  
                  SUITE 500  
City-State-Zip: FORT WORTH TX 76107

*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:** AZZ SPECIALTY REPAIR AND OVERALL LLC

**MEMBER**

**04/13/2017**

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

\_\_\_\_\_ Date