

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000001300

Entity Name: AQUILEX WSI LLC

Current Principal Place of Business:

2225 SKYLAND CT.
NORCROSS, GA 30071

Current Mailing Address:

2225 SKYLAND CT.
NORCROSS, GA 30071 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 MGRM
Name AQUILEX SPECIALTY REPAIR AND
OVERHAUL LLC
Address 2225 SHYLAND CT.
City-State-Zip: NORCROSS GA 30071

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOUG JACOBS

**SVP AND GENERAL
MANAGER**

03/11/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date