

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000004508

**FILED**  
**Feb 08, 2019**  
**Secretary of State**  
**2244972279CC**

**Entity Name:** KME AMERICA MARINE TUBE & FITTING, LLC

**Current Principal Place of Business:**

3400 EVERGREEN AVENUE  
JACKSONVILLE, FL

**Current Mailing Address:**

3400 EVERGREEN AVENUE  
JACKSONVILLE, FL US

**FEI Number:** 46-2332592

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNITED CORPORATE SERVICES, INC.  
9200 SOUTH DADELAND BLVD., SUITE 508  
MIAMI, FL 33156 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 SHAY, JOHN  
Address 1000 JORIE BLVD., SUITE 111  
City-State-Zip: OAK BROOK IL 60523

Title CONTROLLER  
Name EADIE, ANN M  
Address 3440 EVERGREEN AVENUE  
City-State-Zip: JACKSONVILLE FL

Title CEO  
Name GROW, DARRELL  
Address 3440 EVERGREEN AVENUE  
City-State-Zip: JACKSONVILLE FL

*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:** ANN M EADIE

**CONTROLLER**

**02/08/2019**

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

\_\_\_\_\_  
Date