

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1500001498

**Entity Name:** HEIL TRAILER INTERNATIONAL, LLC

**Current Principal Place of Business:**

1145 CONGRESS PKWY N  
ATHENS, TN 37303

**Current Mailing Address:**

1145 CONGRESS PKWY N  
ATHENS, TN 37303 US

**FEI Number: 45-3855033**

**Certificate of Status Desired: No**

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

CT 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 CHAPPLE, DOUG  
Address 1145 CONGRESS PKWY N  
City-State-Zip: ATHENS TN 37303

Title MEMBER  
Name EDME, STANLEY  
Address 1145 CONGRESS PKWY N  
City-State-Zip: ATHENS TN 37303

Title MEMBER  
Name FEUSTEL, DOUGLAS  
Address 1145 CONGRESS PKWY N  
City-State-Zip: ATHENS TN 37303

Title MEMBER  
Name IGLESIAS, RICARDO  
Address 1145 CONGRESS PKWY N  
City-State-Zip: ATHENS TN 37303

*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: DOUG CHAPPLE**

**MEMBER**

**04/03/2018**

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

\_\_\_\_\_  
Date