

**2026 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000001504

**Entity Name:** ARAMSCO RENTALS, LLC

**Current Principal Place of Business:**

5 RADNOR CORPORATE CENTER 100 MATSONFORD ROAD  
SUITE 510  
RADNOR, PA 19087

**Current Mailing Address:**

5 RADNOR CORPORATE CENTER 100 MATSONFORD ROAD  
SUITE 510  
RADNOR, PA 19087 US

**FEI Number:** 82-1993140

**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	MANAGER	Title	MANAGER
Name	SALERNO, RICHARD	Name	JAFFE, STEVEN
Address	5 RADNOR CORPORATE CENTER 100 MATSONFORD ROAD SUITE 510	Address	5 RADNOR CORPORATE CENTER 100 MATSONFORD ROAD SUITE 510
City-State-Zip:	RADNOR PA 19087	City-State-Zip:	RADNOR PA 19087
Title	SECRETARY		
Name	MOLL-TAYLOR, KATE		
Address	5 RADNOR CORPORATE CENTER 100 MATSONFORD ROAD SUITE 510		
City-State-Zip:	RADNOR PA 19087		

*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:** KATE MOLL-TAYLOR

**SECRETARY**

**03/11/2026**

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

\_\_\_\_\_  
Date