| No. <b>W 123725</b>                                                                          | Due no later than Apr 30, 2017                                                                                           | 2. Registered Agent and Address (NO PO BOX)                            |       |         |             |
|----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------|---------|-------------|
| Return to:                                                                                   | Annual Report Form                                                                                                       | CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 |       |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080             | 1. Mailing Address: Correct in this box if needed.  SOUTHERN GRAPHIC SYSTEMS, LLC  BELINDA O REIS  626 W MAIN ST STE 500 |                                                                        |       |         |             |
|                                                                                              | LOUISVILLE KY 40202                                                                                                      | 3. New Registered Agent Signature:*                                    |       |         |             |
| NO FILING FEE IF RECEIVED BY DUE DATE                                                        |                                                                                                                          |                                                                        |       |         |             |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. |                                                                                                                          |                                                                        |       |         |             |
| Office Held Name                                                                             | Street or PO Address                                                                                                     | City                                                                   | State | Country | Postal Code |
| MANAGER AIDAN TRAG                                                                           | CEY 626 WEST MAIN STREET SUITE 500                                                                                       | LOUISVILLE                                                             | KY    | USA     | 40202-4269  |
|                                                                                              |                                                                                                                          |                                                                        |       |         |             |
| 5. Organized Under the Laws of: 6. Annual Report must be signed.*                            |                                                                                                                          |                                                                        |       |         |             |
| KY Signature: Belinda O Reis                                                                 |                                                                                                                          | Date: 02/22/2017                                                       |       |         |             |
| W 123725                                                                                     | Name (type or print): Belinda O Reis                                                                                     | Title: Tax Compliance Mgr                                              |       |         |             |
| Processed 02/22/2017                                                                         | * Electronically provided signatures are accepted as original signatures.                                                |                                                                        |       |         |             |