No. W 180222		Due no later than Mar 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. SUPERION, LLC SALES TAX 1000 BUSINESS CENTER DR LAKE MARY FL 32746		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*			
4. Limited Liability Companies: En	er Naı	nes and Addresses of at least one Memb	er or Manager.				
Office Held Name		Street or PO A	Address	City	State	Country	Postal Code
MANAGER LISA NEUMANN		NN 1000 BUSINES	S CENTER DR	LAKE MARY	FL	USA	32746
MANAGER TOM	MANAGER TOM AMBURG		S CENTER DR	LAKE MARY	FL	USA	32746
MANAGER BRAD SURMII		INSKY 1000 BUSINES	S CENTER DR	LAKE MARY	FL	USA	32746
MANAGER KEVIN LAFEB		BER 1000 BUSINES	S CENTER DR	LAKE MARY	FL	USA	32746
MANAGER SIMON ANGOVE		DVE 1000 BUSINES	S CENTER DR	LAKE MARY	FL	USA	32746
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
DE		Signature: Lisa Neumann	Date: 05/04/2018				
W 180222		Name (type or print): Lisa Neumann	Title: Manager				
Processed 05/04/2018 * Electronically provided signatures are accepted as original signatures.							