

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000034996

Entity Name: MILA SOLUTIONS, LLC

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1692 CLOVER CIRCLE  
MELBOURNE, FL 32935 US

**New Principal Place of Business:**

**Current Mailing Address:**

1692 CLOVER CIRCLE  
MELBOURNE, FL 32935 US

**New Mailing Address:**

FEI Number: 20-8764501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BANKE, JAMES A  
1692 CLOVER CIRCLE  
MELBOURNE, FL 32935 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BANKE, JAMES A  
Address: 1692 CLOVER CIRCLE  
City-St-Zip: MELBOURNE, FL 32935 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JAMES A. BANKE

MGRM

01/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date