# 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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

## SIGNATURE: ALINE M. TOM

Electronic Signature of Signing Authorized Person(s) Detail

# 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000050004

Entity Name: RENDER SOLUTIONS LLC

#### **Current Principal Place of Business:**

345 COLLINS AVENUE 5 MIAMI BEACH, FL 33139

#### **Current Mailing Address:**

345 COLLINS AVENUE 5 MIAMI BEACH, FL 33139

### FEI Number: 20-4925831

### Name and Address of Current Registered Agent:

TOM, ALINE M 345 COLLINS AVENUE 5 MIAMI BEACH, FL 33139 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 () **b** ( ) . .

Authorized Person(s) Detail :			
Title	MGR	Title	MGR
Name	GRANAT, RICARDO R	Name	TOM, ALINE M
Address	345 COLLINS AVE # 5	Address	345 COLLINS AVE # 5
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139

FILED Jan 24, 2013 Secretary of State CC9266180932

Certificate of Status Desired: No

01/24/2013 MGR

Date

Date