

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000050004

**Entity Name:** RENDER SOLUTIONS LLC

**Current Principal Place of Business:**

345 COLLINS AVENUE  
3  
MIAMI BEACH, FL 33139

**FILED**  
**Apr 25, 2014**  
**Secretary of State**  
**CC4231648277**

**Current Mailing Address:**

345 COLLINS AVENUE  
3  
MIAMI BEACH, FL 33139 US

**FEI Number:** 20-4925831

**Certificate of Status Desired:** No

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

TOM, ALINE M  
345 COLLINS AVENUE  
3  
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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name GRANAT, RICARDO R  
Address 345 COLLINS AVE # 3  
City-State-Zip: MIAMI BEACH FL 33139

Title MGR  
Name TOM, ALINE M  
Address 345 COLLINS AVE # 3  
City-State-Zip: MIAMI BEACH FL 33139

*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:** ALINE M TOM

MGR

04/25/2014

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

\_\_\_\_\_  
Date