# that my name appears above, or on an attachment with all other like empowered. 01/15/2018

SIGNATURE: EDMUND SANTIAGO

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: REDBRIDGE SOLUTIONS, LLC **Current Principal Place of Business:** 

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

**101 ALMERIA AVENUE** CORAL GABLES, FL 33134

DOCUMENT# L09000052773

# **Current Mailing Address:**

**101 ALMERIA AVENUE** CORAL GABLES. FL 33134 US

# FEI Number: 27-0300943

### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

WEIL, LAURIE **101 ALMERIA AVENUE** CORAL GABLES, FL 33134 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:

Authorized Person(s) Detail :				
Title	MGRM	Title	MGR	

Title	MGRM	Title	MGR
Name	REDBRIDGE GROUP OF FLORIDA	Name	SANTIAGO, EDMUND
Address	101 ALMERIA AVENUE	Address	101 ALMERIA AVENUE
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

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

PRESIDENT



# FILED Jan 15, 2018 Secretary of State CC6091921203

Date

Date