

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000039868

**Entity Name:** INTERNATIONAL INSTITUTE FOR CREDIBILITY ASSESMENT, LLC**FILED**  
**Jan 13, 2014**  
**Secretary of State**  
**CC1019587864****Current Principal Place of Business:**255 UNIVERSITY DRIVE  
CORAL GABLES, FL 33134**Current Mailing Address:**255 UNIVERSITY DRIVE  
CORAL GABLES, FL 33134**FEI Number: 45-4793140****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ARIAS, SIDNEY W  
255 UNIVERSITY DRIVE  
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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR
Name	ARIAS, SIDNEY W
Address	255 UNIVERSITY DRIVE
City-State-Zip:	CORAL GABLES FL 33134

Title	MGR
Name	WISE-ARIAS, AIDA N
Address	255 UNIVERSITY DRIVE
City-State-Zip:	CORAL GABLES FL 33134

Title	MGR
Name	NOVOA-BERMEDEZ, MANUEL ANTONIO
Address	255 UNIVERSITY DRIVE
City-State-Zip:	CORAL GABLES FL 33134

  

Title	MGR
Name	SANDRA DE PILAR ZAMBRANO-PENA
Address	255 UNIVERSITY DRIVE
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 that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SIDNEY ARIAS****MANAGER****01/13/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date