

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000106832

**Entity Name:** NCS MARKETING SERVICES, LLC

**Current Principal Place of Business:**

1929 ALLEN PARKWAY  
HOUSTON, TX 77019

**FILED**  
**Feb 06, 2015**  
**Secretary of State**  
**CC2788575565**

**Current Mailing Address:**

1929 ALLEN PARKWAY  
TAX DEPT 9TH FL  
HOUSTON, TX 77019 US

**FEI Number:** 45-3536474

**Certificate of Status Desired:** No

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

NATIONAL CORPORATE RESEARCH, LTD.  
155 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 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	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	BRIGGS, CURTIS G	Name	FOLEY, AARON G
Address	1929 ALLEN PARKWAY TAX DEPT 9TH FL	Address	1929 ALLEN PARKWAY TAX DEPT 9TH FL
City-State-Zip:	HOUSTON TX 77019	City-State-Zip:	HOUSTON TX 77019

*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:** AARON G FOLEY

**AUTHORIZED MEMBER**

**02/06/2015**

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

\_\_\_\_\_  
Date