

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000116159

Entity Name: ALYGNMENT CONSULTING, LLC

Current Principal Place of Business:

4613 N. UNIVERSITY DRIVE
#551
CORAL SPRINGS, FL 33067

Current Mailing Address:

4613 N. UNIVERSITY DRIVE
#551
CORAL SPRINGS, FL 33067 US

FEI Number: 45-3571241

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ODETTE, WARREN S
4613 N. UNIVERSITY DRIVE
#551
CORAL SPRINGS, FL 33067 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 MGRM
Name ODETTE, WARREN S
Address 4613 N. UNIVERSITY DRIVE
#551
City-State-Zip: CORAL SPRINGS FL 33067

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: WARREN ODETTE

MNGR MEMBER

04/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date