## 2017 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

FILED Apr 26, 2017

**Secretary of State** 

CC1709755886

## 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

Electronic Signature of Signing Authorized Person(s) Detail

. MEMBER 04/26/2017

Date