

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000040440

**Entity Name:** SOLUTION BOSS, LLC

**Current Principal Place of Business:**

206 LAKE HOBBS RD  
LUTZ, FL 33548

**Current Mailing Address:**

PO BOX 456  
LUTZ, FL 33548

**FEI Number:** 45-4857666

**Certificate of Status Desired:** No

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

SERRAVALLE, NIK  
206 LAKE HOBBS RD  
LUTZ, FL 33548 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 SERRAVALLE, NIK  
Address 206 LAKE HOBBS RD  
City-State-Zip: LUTZ FL 33548

Title MGRM  
Name SERRAVALLE, JOAN  
Address 206 LAKE HOBBS RD  
City-State-Zip: LUTZ FL 33548

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** NIK SERRAVALLE

**PRES**

**04/29/2013**

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

\_\_\_\_\_  
Date