

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000155200

**Entity Name:** VOYAGE SOLUTIONS, LLC

**Current Principal Place of Business:**

4566 ORANGE BLVD  
1006  
SANFORD, FL 32771

**Current Mailing Address:**

4566 ORANGE BLVD  
1006  
SANFORD, FL 32771 US

**FEI Number:** 46-1550349

**Certificate of Status Desired:** No

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

CURLEY, BETH  
6921 SYLVAN WOODS DRIVE  
SANFORD, FL 32771 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 BETH, CURLEY  
Address 4566 ORANGE BLVD  
SUITE 1006  
City-State-Zip: SANFORD FL 32771

*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:** BETH CURLEY

CFO

02/23/2015

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

\_\_\_\_\_ Date