

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000116115

**Entity Name:** INTEGRATED PROPERTY SOLUTIONS, LLC

**Current Principal Place of Business:**

1817 S OCEAN DR  
819  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

1817 S OCEAN DR  
819  
HALLANDALE BEACH, FL 33009

**FEI Number: 80-0951088**

**Certificate of Status Desired: No**

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

SHAULOV, EDWARD D  
1817 S OCEAN DR  
819  
HALLANDALE BEACH, FL 33009 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 SHAULOV, EDWARD D  
Address 1977 CLAIRMONT TER NE  
City-State-Zip: ATLANTA GA 30345

Title MGRM  
Name SEMAND, VITALIY A  
Address 1817 S OCEAN DR APT 819  
City-State-Zip: HALLANDALE BEACH FL 33009

*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: VITALIY A. SEMAND**

**MGRM**

**04/03/2014**

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

\_\_\_\_\_  
Date