

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000113047

**Entity Name:** COUPLESSOLUTIONS LLC

**Current Principal Place of Business:**

7380 SAND LAKE DR  
500  
ORLANDO, FL 32819

**Current Mailing Address:**

7380 SAND LAKE DR  
500  
ORLANDO, FL 32819 US

**FEI Number:** 47-4459597

**Certificate of Status Desired:** No

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

GROSMAN, SIGRUN  
11538 WESTWOOD BLVD  
211  
ORLANDO, FL 32821 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 AR  
Name SIGURJONSDOTTIR, SIGRUN PHD  
Address 11538 WESTWOOD BLVD  
City-State-Zip: ORLANDO FL 32821

*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:** SIGRUN SIGURJONSDOTTIR

PHD

07/25/2017

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

\_\_\_\_\_  
Date