

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000152888

**Entity Name:** QUATRRO DIRECT LLC

**Current Principal Place of Business:**

1850 PARKWAY PLACE SUITE 1100  
MARIETTA, GA 30067

**Current Mailing Address:**

1850 PARKWAY PLACE SUITE 1100  
MARIETTA, GA 30067 US

**FEI Number:** 47-5361357

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            CEO  
Name            MASTRINI, MARK  
Address        1850 PARKWAY PLACE SUITE 1100  
City-State-Zip: MARIETTA GA 30067

Title            CFO  
Name            MORGAN, BOB  
Address        1850 PARKWAY PLACE SUITE 1100  
City-State-Zip: MARIETTA GA 30067

Title            PRESIDENT  
Name            KASHYAP, MONICA  
Address        1850 PARKWAY PLACE  
                 SUITE 1100  
City-State-Zip: MARIETTA GA 30067

*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:** MONICA KASHYAP

P

02/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date