

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000001337

Entity Name: CYPREXX SERVICES, LLC**Current Principal Place of Business:**525 GRAND REGENCY BLVD.
BRANDON, FL 33510**Current Mailing Address:**PO BOX 874
BRANDON, FL 33509**FEI Number:** 26-2198530**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 VICE PRESIDENT
Name ORY, BRETT
Address PO BOX 874
City-State-Zip: BRANDON FL 33509

Title VICE PRESIDENT
Name ORY, LINDA
Address 131 HICKORY CREEK DRIVE
City-State-Zip: BRANDON FL 33511

Title PRESIDENT/CEO
Name ORY, RONNIE J
Address 131 HICKORY CREEK DRIVE
City-State-Zip: BRANDON FL 33511

Title VICE PRESIDENT/TREASURER
Name ORY, RJ
Address 525 GRAND REGENCY BLVD.
City-State-Zip: BRANDON FL 33510

Title VICE PRESIDENT/SECRETARY
Name WILLIAMS, RHONDA O
Address 129 HICKORY CREEK DRIVE
City-State-Zip: BRANDON FL 33511

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: RHONDA ORY WILLIAMS**SECRETARY****04/29/2015**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date