

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000000481

**Entity Name:** TRULITE INTERMEDIATE HOLDING, LLC

**Current Principal Place of Business:**

403 WESTPARK COURT  
201  
PEACHTREE CITY, GA 30269

**Current Mailing Address:**

403 WESTPARK COURT  
201  
PEACHTREE CITY, GA 30269 US

**FEI Number:** 27-1728387

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 MANAGER  
Name ALGER, MICHAEL E  
Address 800 FAIRWAY DRIVE, SUITE 200  
City-State-Zip: DEERFIELD BEACH FL 33441

Title MANAGER  
Name MEZZANOTTE, JR., DAVID A.  
Address 800 FAIRWAY DRIVE, SUITE 200  
City-State-Zip: DEERFIELD BEACH FL 33441

Title MANAGER  
Name SCHMITZ, PAUL  
Address 800 FAIRWAY DRIVE, SUITE 200  
City-State-Zip: DEERFIELD BEACH FL 33441

Title MANAGER  
Name GARNER, R. ANDREW  
Address 800 FAIRWAY DRIVE, SUITE 200  
City-State-Zip: DEERFIELD BEACH FL 33441

*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:** R. ANDREW GARNER

**MANAGER**

**04/23/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date