## **2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000004925

**Entity Name: GUIDEPOST SOLUTIONS LLC** 

**Current Principal Place of Business:** 

800 VILLAGE SQUARE CROSSING

SUITE 205

PALM BEACH GARDENS, FL 33410

**Current Mailing Address:** 

800 VILLAGE SQUARE CROSSINGS SUITE 205

PALM BEACH GARDENS, FL 33410

FEI Number: 80-0581535 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name SCHWARTZ, BART Name ROSETTI, JOSEPH

Address 415 MADISON AVENUE, 11TH FLOOR Address 415 MADISON AVENUE, 11TH FLOOR

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

Title SECRETARY

Name COLLURA, ANTHONY M Address 415 MADISON AVENUE

11TH FL

City-State-Zip: NEW YORK NY 10017

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: ANTHONY M COLLURA

SECRETARY CHIEF LEGAL OFFICER 02/18/2015

Date

FILED Feb 18, 2015

**Secretary of State** 

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