

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000005009

**Entity Name:** GEOSAM VERANDA, LLC

**Current Principal Place of Business:**

2121 S. HIAWASSEE ROAD  
SUITE 130  
ORLANDO, FL 32835

**Current Mailing Address:**

2121 S. HIAWASSEE ROAD  
SUITE 130  
ORLANDO, FL 32835 US

**FEI Number:** 45-3513594

**Certificate of Status Desired:** Yes

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

STOWERS, JAMES ESQ.  
424 LUNA BELLA LANE  
SUITE 122  
NEW SMYRNA BEACH, FL 32168 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:** JAMES STOWERS

04/25/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           ARMOYAN, HRIPSIME  
Address        145 HOBSONS LAKE DRIVE #400  
City-State-Zip: HALIFAX NOVA SCOTIA B3S OH9

Title           MANAGER  
Name           DARROW, STEVEN  
Address        145 HOBSONS LAKE DRIVE, #400  
City-State-Zip: HALIFAX NOVA SCOTIA B3S OH9

Title           MANAGER  
Name           ARMOYAN, GEORGE  
Address        145 HOBSONS LAKE SRIVE, #400  
City-State-Zip: HALIFAX NOVA SCOTIA BS OH9

Title           MANAGER  
Name           ARMOYAN, GEORGE JR.  
Address        145 HOBSONS LAKE DRIVE #400  
City-State-Zip: HALIFAX NOVA SCOTIA B3S OH9

Title           MANAGER  
Name           PETER, DAVID  
Address        424 LUNA BELLA LANE  
                  SUITE 122  
City-State-Zip: NEW SMYRNA BEACH FL 32168

*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:** STEVEN DARROW

MANAGER

04/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date