2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000001103

Entity Name: GUIDEPOINTE SOLUTIONS, LLC

Current Principal Place of Business:

------ current Finicipal Flace of Busine

825 MARKET STREET, STE. 300 ALLEN, TX 75013

Current Mailing Address:

825 MARKET STREET, STE. 300 ALLEN, TX 75013

FEI Number: 45-2598971 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

FILED Jan 05, 2015

Secretary of State

CC0917623660

Authorized Person(s) Detail:

Title MGR

Name HOMELAND HEALTHCARE, INC.
Address 825 MARKET STREET, STE. 300

City-State-Zip: ALLEN TX 75013

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: REBA J. LEONARD

Electronic Signature of Signing Authorized Person(s) Detail

SECRETARY

01/05/2015