

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000006690

Entity Name: SMARTCOMP LLC**Current Principal Place of Business:**6000 TOWN CENTER BLVD
SUITE 105
CANONSBURG, PA 15317**Current Mailing Address:**7785 BAYMEADOWS WAY SUITE 302
JACKSONVILLE, FL 32256 US**FEI Number:** 30-0469665**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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	ALIGN NETWORKS SUB, INC.
Address	7785 BAYMEADOWS WAY, SUITE 302
City-State-Zip:	JACKSONVILLE FL 32256

Title	PRESIDENT
Name	DELANEY , JOSEPH
Address	6000 TOWN CENTER BLVD SUITE 105
City-State-Zip:	CANONSBURG PA 15317

Title	CFO
Name	OLSON , DAVID R.
Address	6000 TOWN CENTER BLVD SUITE 105
City-State-Zip:	CANONSBURG PA 15317

Title	SECRETARY
Name	DAVIS , STEVEN
Address	6000 TOWN CENTER BLVD SUITE 105
City-State-Zip:	CANONSBURG PA 15317

Title	VP
Name	ENGLISH , KEVIN
Address	6000 TOWN CENTER BLVD SUITE 105
City-State-Zip:	CANONSBURG PA 15317

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 DAVISCAITLIN LAZARUS,
ATTORNEY IN FACT

01/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date