## 2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000001956

Entity Name: INFORCE SOLUTIONS, LLC

**Current Principal Place of Business:** 

300 PARK BROOKE PLACE SUITE 220

WOODSTOCK, GA 30189

**Current Mailing Address:** 

300 PARK BROOKE PLACE SUITE 220 WOODSTOCK, GA 30189 US

FEI Number: 38-3926689 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** Apr 16, 2015

**Secretary of State** 

CC5665440314

Authorized Person(s) Detail:

Title MANAGER Title **MANAGER** 

SPAETH, GREG A. PETERSON, BRIAN B. Name Name

Address 300 PARK BROOKE PLACE Address 300 PARK BROOKE PLACE SUITE 220

SUITE 220

WOODSTOCK GA 30189 WOODSTOCK GA 30189 City-State-Zip: City-State-Zip:

Title **MANAGER** Title ASSISTANT SECRETARY

THOMAS, ANTHONY G. HARDY, TRACY M. Name Name

300 PARK BROOKE PLACE 300 PARK BROOKE PLACE Address Address

SUITE 220 SUITE 220

WOODSTOCK GA 30189 WOODSTOCK GA 30189 City-State-Zip: City-State-Zip:

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: TRACY M. HARDY

ASSISTANT SECRETARY

04/16/2015