

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000008104

**Entity Name:** TECH TESTING SOLUTIONS, LLC**Current Principal Place of Business:**700 UNIVERSE BOULEVARD  
JUNO BEACH, FL 33408**Current Mailing Address:**700 UNIVERSE BOULEVARD  
ATTN: CORPORATE GOVERNANCE  
JUNO BEACH, FL 33408 US**FEI Number:** 38-3983239**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEON, J.E.  
4200 WEST FLAGLER STREET, SUITE 2113  
MIAMI, 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**Authorized Person(s) Detail :**

Title	P
Name	REAGAN, RONALD R
Address	700 UNIVERSE BOULEVARD
City-State-Zip:	JUNO BEACH FL 33408

Title	TREASURER
Name	CUTLER, PAUL I
Address	700 UNIVERSE BOULEVARD
City-State-Zip:	JUNO BEACH FL 33408

Title	ASSISTANT SECRETARY
Name	SEELEY, W SCOTT
Address	700 UNIVERSE BOULEVARD
City-State-Zip:	JUNO BEACH FL 33408

Title	VP
Name	PETERSONO, DAVID L
Address	700 UNIVERSE BOULEVARD
City-State-Zip:	JUNO BEACH FL 33408

Title	SECRETARY
Name	PLOTSKY, MELISSA A
Address	700 UNIVERSE BOULEVARD
City-State-Zip:	JUNO BEACH FL 33408

Title	ASSISTANT VICE PRESIDENT
Name	WATREN, KRISTINA K
Address	700 UNIVERSE BOULEVARD
City-State-Zip:	JUNO BEACH FL 33408

*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:** MELISSA A. PLOTSKY**SECRETARY****04/26/2016**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date