

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000002487

**Entity Name:** ALIGN 1 SOLUTIONS, LLC**Current Principal Place of Business:**1301 E BROWARD BLVD STE 320  
FORT LAUDERDALE, FL 33301**Current Mailing Address:**1301 E BROWARD BLVD STE 320  
FORT LAUDERDALE, FL 33301 US**FEI Number:** 82-1890713**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MINDALA, HALLE  
1301 E BROWARD BLVD STE 320  
FORT LAUDERDALE, FL 33301 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:** HALLE MINDALA

02/03/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AP
Name	MINDALA, HALLE
Address	1301 E BROWARD BLVD STE 320
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	PRESIDENT
Name	HARLOW, BRYCE
Address	1301 E BROWARD BLVD STE 320
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	AP
Name	UHRINA, STEFANIE
Address	561 BOSTON MILLS RD STE 500
City-State-Zip:	HUDSON OH 44236

Title	DIRECTOR
Name	HALL, NIKOLE
Address	1301 E BROWARD BLVD STE 320
City-State-Zip:	FORT LAUDERDALE FL 33301

*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:** NIKOLE HALL**DIRECTOR**

02/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date