

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000003811

Entity Name: ILINK SOLUTIONS, L.L.C.

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2400 E. LAS OLAS BOULEVARD STE. C  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

316 SUNSET DRIVE  
FORT LAUDERDALE, FL 33301 US

**New Mailing Address:**

FEI Number: 56-2314443

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OLIVE, BENJAMIN E P.A.  
2400 E LAS OLAS BOULEVARD SUITE B  
FORT LAUDERDALE, FL 33301 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SILVA, LUCAS B  
Address: 2400 E. LAS OLAS BOULEVARD STE. C  
City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: LUCAS SILVA

MGRM

01/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date