

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000026451

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** RELIABILITY SOLUTIONS TRAINING, LLC

**Current Principal Place of Business:**

7801 JONES ROAD  
WALNUT HILL, FL 32568

**New Principal Place of Business:**

**Current Mailing Address:**

7801 JONES ROAD  
WALNUT HILL, FL 32568

**New Mailing Address:**

**FEI Number:** 26-3830590

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DORTCH, GABRIELLA H  
7801 JONES ROAD  
WALNUT HILL, FL 32568 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:** MGR  
**Name:** DORTCH, GABRIELLA H  
**Address:** 7801 JONES ROAD  
**City-St-Zip:** WALNUT HILL, FL 32568

**Title:** MGR  
**Name:** MCKINNON, IAN  
**Address:** 6580 SCENIC HWY  
**City-St-Zip:** PENSACOLA, FL 32504

**Title:** MGR  
**Name:** DORTCH, TIMOTHY E  
**Address:** 7801 JONES ROAD  
**City-St-Zip:** WALNUT HILL, FL 32568

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:** GABRIELLA H. DORTCH

MGR

03/20/2012

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