

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019627

FILED  
Apr 06, 2012  
Secretary of State

**Entity Name:** BRICKMAN FACILITY SOLUTIONS LLC

**Current Principal Place of Business:**

18227 FLOWER HILL WAY, STE D  
GAITHERSBURG, MD 20879 US

**New Principal Place of Business:**

**Current Mailing Address:**

18227 FLOWER HILL WAY, STE D  
GAITHERSBURG, MD 20879 US

**New Mailing Address:**

FEI Number: 80-0454038

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: HJELLE, MARK  
Address: 18227 FLOWER HILL WAY, SUITE D  
City-St-Zip: GAITHERBURG, MD 20879

Title: MGR  
Name: POLOZIE, STEPHEN  
Address: 18227 FLOWER HILL WAY, SUITE D  
City-St-Zip: GAITHERBURG, MD 20879

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: STEPHEN POLOZIE

MGR

04/06/2012

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