

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000045960

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** OLIVE TREE SOLUTIONS, LLC

**Current Principal Place of Business:**

8213 ROLLA CT.  
ORLANDO, FL 32836

**New Principal Place of Business:**

**Current Mailing Address:**

8213 ROLLA CT.  
ORLANDO, FL 32836

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LARSON ACCOUNTING & CONSULTING SERVICES LL  
8810 COMMODITY CIRCLE  
SUITE 17  
ORLANDO, FL 32819 US

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

LARSON ACCOUNTING & CONSULTING SERVICES LL  
8615 COMMODITY CIRCLE  
SUITE 06  
ORLANDO, FL 32819 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: LARSON ACCOUNTING

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: OLIVEIRA, LIS R  
Address: 8213 ROLLA CT.  
City-St-Zip: ORLANDO, FL 32836

Title: MGR  
Name: MESTRINHO, LUIZ WAGNER O  
Address: 8213 ROLLA CT.  
City-St-Zip: ORLANDO, FL 32836

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: LIS R. OLIVEIRA

MGR

04/30/2012

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