

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000135915

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** VERIFICATION SOLUTIONS LLC

**Current Principal Place of Business:**

1217 N MCMULLEN BOOTH RD  
CLEARWATER, FL 33759

**New Principal Place of Business:**

**Current Mailing Address:**

1217 N MCMULLEN BOOTH RD  
CLEARWATER, FL 33759

**New Mailing Address:**

**FEI Number:** 45-3952556

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATTHEW, GENTILE  
1214 DAVIS RD  
DUNEDIN, FL 34698 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: ROBERT, ALCALDE  
Address: 110 ATHENS STREET  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: MGRM  
Name: MATTHEW, GENTILE  
Address: 1214 DAVIS RD  
City-St-Zip: DUNEDIN, FL 34698 US

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: ROBERT ALCALDE

MGRM

05/01/2012

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