

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000025618

**Entity Name:** THOMAS LEE GROUP ACQUISITIONS, LLC

**Current Principal Place of Business:**

7512 DR. PHILLIPS BLVD.  
SUITE 50 PMB 133  
ORLANDO, FL 32819

**FILED**  
**Mar 08, 2013**  
**Secretary of State**  
**CC0948468101**

**Current Mailing Address:**

7512 DR. PHILLIPS BLVD.  
SUITE 50 PMB 133  
ORLANDO, FL 32819 US

**FEI Number:** 65-1200260

**Certificate of Status Desired:** Yes

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

GUILLOT, BRYAN  
9966 KILGORE ROAD  
ORLANDO, FL 32836 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name GUILLOT, BRYAN  
Address 7512 DR. PHILLIPS BLVD., SUITE 50  
PMB 133  
City-State-Zip: ORLANDO FL 32819

Title MGRM  
Name GUILLOT, LINDA  
Address 7512 DR. PHILLIPS BLVD., SUITE 50  
PMB 133  
City-State-Zip: ORLANDO FL 32819

Title MGR  
Name R&D PARTNERS  
Address 734 RUGBY STREET  
City-State-Zip: ORLANDO FL 32804

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRYAN GUILLOT

MGRM

03/08/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date