

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000107766

**Entity Name:** THE IDENTITYPE GROUP, LLC

**Current Principal Place of Business:**

5470 E. BUSCH BLVD  
UNIT 125  
TAMPA, FL 33617

**Current Mailing Address:**

5470 E. BUSCH BLVD  
UNIT 125  
TAMPA, FL 33617 US

**FEI Number:** 26-1310386

**Certificate of Status Desired:** Yes

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

MCKINLEY, LEILI  
5470 E. BUSCH BLVD  
UNIT 125  
TAMPA, FL 33717 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 MCKINLEY, LEILI  
Address 1007 BAY ESPLANADE  
City-State-Zip: CLEARWATER FL 33767

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LEILI MCKINLEY

**MANAGER**

**04/08/2018**

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

\_\_\_\_\_  
Date