

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000092500

**Entity Name:** QUADDRA SOLUTIONS, LLC

**Current Principal Place of Business:**

1632 BONITA BLUFF CT.  
RUSKIN, FL 33570

**FILED**  
**Apr 09, 2015**  
**Secretary of State**  
**CC0107549051**

**Current Mailing Address:**

1632 BONITA BLUFF CT.  
RUSKIN, FL 33570 US

**FEI Number: 27-1094140**

**Certificate of Status Desired: No**

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

DE WULF, RUDY  
1632 BONITA BLUFF CT  
RUSKIN, FL 33570 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 MRGM  
Name DE WULF, RUDY  
Address 1632 BONITA BLUFF CT.  
City-State-Zip: RUSKIN FL 33570

Title MGR  
Name DE WULF, ADRIAAN  
Address 300 OAOS TRIAL  
City-State-Zip: IRVING TX 75063

Title AMBR  
Name FAYLONA, MARIA TERESA  
Address 1632 BONITA BLUFF CT.  
City-State-Zip: RUSKIN FL 33570

Title MGR  
Name CARR - DE WULF, NATASJA  
Address 1700 WILLOUGHBY WAY  
City-State-Zip: LITTLE ELM TX 75056

*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: RUDY DE WULF**

**MANAGING PARTNER**

**04/09/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date