

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000130049

**Entity Name:** LA TITLE SOLUTIONS, LLC

**Current Principal Place of Business:**

1130 LEE BLVD  
LEHIGH ACRES, FL 33936

**Current Mailing Address:**

1130 LEE BLVD  
LEHIGH ACRES, FL 33936 US

**FEI Number:** 27-4333164

**Certificate of Status Desired:** No

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

OHMANN, TARA  
1130 LEE BLVD  
LEHIGH ACRES, FL 33936 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:** TARA OHMANN

03/31/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER, MANAGER  
Name OHMANN, TARA  
Address 1130 LEE BLVD.  
City-State-Zip: LEHIGH ACRES FL 33936

Title AUTHORIZED MEMBER  
Name OHMANN, MARTIN A. III  
Address 1130 LEE BLVD  
City-State-Zip: LEHIGH ACRES FL 33936

*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:** TARA OHMANN

MANAGING MEMBER

03/31/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date