

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000029704

**Entity Name:** IHS OF SOUTH FLORIDA, LLC

**Current Principal Place of Business:**

1704 WILES ROAD  
SUITE 110  
CORAL SPRINGS , FL 33067

**Current Mailing Address:**

1704 WILES ROAD  
SUITE 110  
CORAL SPRINGS , FL 33067 US

**FEI Number:** 45-5144205

**Certificate of Status Desired:** No

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

GARAY, JONEA A  
1704 WILES ROAD  
SUITE 110  
CORAL SPRINGS , FL 33067 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:** JONEA A GARAY

04/18/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGING MEMBER  
Name           SHALLER, NELSON  
Address        6001 BROKEN SOUND PARKWAY  
                  SUITE 508  
City-State-Zip: BOCA RATON FL 33487

*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:** NELSON SHALLER

ACCOUNTING  
COORDINATOR

04/18/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date