

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000014403

**Entity Name:** IRIESOCIAL LLC

**Current Principal Place of Business:**

1001 NIGHTHAWK LANE  
811  
ORLANDO, FL 32818

**Current Mailing Address:**

1001 NIGHTHAWK LANE  
811  
ORLANDO, FL 32818 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

SMILEY, MARK MR.  
1001 NIGHTHAWK LANE  
811  
ORLANDO, FL 32818 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 CEO  
Name ROSE, GARNETTE MR.  
Address 1001 NIGHTHAWK LANE  
811  
City-State-Zip: ORLANDO FL 32818

Title CMO  
Name CAMPBELL, MEGIAN MS.  
Address 1001 NIGHTHAWK LANE  
811  
City-State-Zip: ORLANDO FL 32818

Title COO  
Name SMILEY, MARK MR.  
Address 1001 NIGHTHAWK LANE  
811  
City-State-Zip: ORLANDO FL 32818

*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:** GARNETTE ROSE

CEO

04/21/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date