

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000146857

Entity Name: TEST AND VERIFICATION SOLUTIONS, LLC

Current Principal Place of Business:

4500 140TH AVE N SUITE 101
CLEARWATER, FL 33762

Current Mailing Address:

4500 140TH AVE N SUITE 101
CLEARWATER, FL 33762

FEI Number: 47-1877776

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EXPORTACTION LLC
4500 140TH AVE N SUITE 101
CLEARWATER, FL 33762 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 MGR
Name HOLDEN, GAIL
Address 4500 140TH AVE N SUITE 101
City-State-Zip: CLEARWATER FL 33762

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: GAIL HOLDEN

MGR

04/24/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date