

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000011275

Entity Name: HU-CS LLC

Current Principal Place of Business:

C/O INTEGRATED TOTAL SOLUTIONS
801 BRICKELL AVE. - STE. 900
MIAMI, FL 33131

Current Mailing Address:

C/O INTEGRATED TOTAL SOLUTIONS
801 BRICKELL AVE. - STE. 900
MIAMI, FL 33131

FEI Number: 47-3245729

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INTEGRATED TOTAL SOLUTIONS, INC.
801 BRICKELL AVE.
STE. 900
MIAMI, FL 33131 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 NICHOLS, ANDREW T
Address (C/O INTEGRATED) 801 BRICKELL
AVE -STE 900
City-State-Zip: MIAMI FL 33131

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: ANDREW T. NICHOLS

MANAGER

03/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date