

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000000908

**Entity Name:** LEVEL 5 GA, LLC

**Current Principal Place of Business:**

2018 POWERS FERRY ROAD SE  
SUITE 750  
ATLANTA, GA 30339

**Current Mailing Address:**

2018 POWERS FERRY ROAD SE  
SUITE 750  
ATLANTA, GA 30339 US

**FEI Number:** 20-0413634

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MGRM  
Name KASSLER, JOSEPH F  
Address 2018 POWERS FERRY ROAD SE  
SUITE 750  
City-State-Zip: ATLANTA GA 30339

Title MGRM  
Name COLVIN, MICHAEL  
Address 2018 POWERS FERRY ROAD SE  
SUITE 750  
City-State-Zip: ATLANTA GA 30339

Title MGRM  
Name HYCHE, JOHN  
Address 2018 POWERS FERRY ROAD SE  
SUITE 750  
City-State-Zip: ATLANTA GA 30339

Title MGRM  
Name ELLER, BRAD  
Address 2018 POWERS FERRY ROAD SE  
SUITE 750  
City-State-Zip: ATLANTA GA 30339

Title MGRM  
Name KASSLER, JUSTIN L.  
Address 2018 POWERS FERRY ROAD SE  
SUITE 750  
City-State-Zip: ATLANTA GA 30339

*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:** BRAD ELLER

MGRM

02/22/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date