

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000001148

Entity Name: SOLV, INC.**Current Principal Place of Business:**260 TOWNSEND ST
SAN FRANCISCO, CA 94107**Current Mailing Address:**260 TOWNSEND ST
SAN FRANCISCO, CA 94107**FEI Number:** 47-4673720**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
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**Officer/Director Detail :**

Title	PDC
Name	FOELLMER, FRANK JR
Address	260 TOWNSEND ST
City-State-Zip:	SAN FRANCISCO CA 94107

Title	S
Name	MURPHY, SHERIANN
Address	260 TOWNSEND ST
City-State-Zip:	SAN FRANCISCO CA 94107

Title	TCFO
Name	PETERSON, BRADLEY K
Address	2300 CLAYTON RD SUITE 800
City-State-Zip:	CONCORD CA 94520

Title	D
Name	ADAIR, DONALD D
Address	16798 W BERNARDO DR
City-State-Zip:	SAN DEIGO CA 92127

Title	D
Name	CAPENER, JOHN T
Address	2300 CLAYTON RD SUITE 800
City-State-Zip:	CONCORD CA 94520

Title	D
Name	HERSHMAN, GEORGE W
Address	16798 W BERNARDO DR
City-State-Zip:	SAN DIEGO CA 92127

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERIANN MURPHY**SECRETARY****03/10/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date