

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000224333

**Entity Name:** GTSC MANAGEMENT, LLC

**Current Principal Place of Business:**

1800 NE 114 STREET  
905  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

1800 NE 114 STREET  
905  
NORTH MIAMI, FL 33181 US

**FEI Number:** 82-2063187

**Certificate of Status Desired:** No

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

CUMMINGS, EDWARD  
8580 NW 4TH STREET  
PEMBROKE PINES, FL 33024 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 AMBR  
Name SOLOMON, TESSA  
Address 1800 NE 114 STREET; APT 905  
City-State-Zip: NORTH MIAMI FL 33181

Title AMBR  
Name COHEN, GIANNI  
Address 577 NE 62ND STREET; APT 7  
City-State-Zip: MIAMI FL 33137

Title AMBR  
Name COHEN, SAMUEL  
Address 1800 NE 114 STREET; APT 1605  
City-State-Zip: NORTH MIAMI FL 33181

*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:** /TESSA SOLOMON/

AMBR

01/29/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date