

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000091466

**Entity Name:** ACE IT TRAINING SOLUTIONS, LLC

**Current Principal Place of Business:**

1515 E SILVER SPRINGS BLVD, STE 103  
OCALA, FL 34470

**Current Mailing Address:**

8008 SE 62ND LANE  
OCALA, FL 34472

**FEI Number: 83-0779800**

**Certificate of Status Desired: Yes**

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

LEWIS, GENTANA  
8008 SE 62ND LN  
OCALA, FL 34472 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	Title	MGR
Name	LEWIS, GENTANA	Name	ALEJANDRO, DEVON
Address	8008 SE 62ND LANE	Address	8008 SE 62ND LN
City-State-Zip:	OCALA FL 34472	City-State-Zip:	OCALA FL 34472

*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: GENTANA T LEWIS**

**MANAGING PARTNER**

**04/04/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date