

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000097807

**Entity Name:** TG6 SOLUTIONS LLC

**Current Principal Place of Business:**

3901 W BROWARD BLVD  
120505  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

3901 W BROWARD BLVD  
120505  
FORT LAUDERDALE, FL 33312 US

**FEI Number:** 82-5258184

**Certificate of Status Desired:** Yes

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

WARREN, TAVARIS R  
1112 OLIVE TREE CIRCLE  
GREENACRES, FL 33413 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 WARREN, TAVARIS  
Address 1112 OLIVE TREE CIRCLE  
City-State-Zip: GREENACRES FL 33413

Title MANAGER  
Name ASE, DAMION  
Address 3901 W BROWARD BLVD  
120505  
City-State-Zip: FORT LAUDERDALE FL 33312

Title MANAGER  
Name BEASLEY, RICKEY  
Address 3078 CLAIRMONT RD NE  
APT. 438  
City-State-Zip: BROOKHAVEN GA 30329

Title MGR  
Name COACHMAN, CORNELIUS JR.  
Address 2355 CENTERVILLE ROAD UNIT 13024  
City-State-Zip: TALLAHASSEE FL 32308

Title MANAGER  
Name PRASPER, CHALI  
Address 3901 W BROWARD BLVD  
120505  
City-State-Zip: FORT LAUDERDALE FL 33312

Title MANAGER  
Name THOMAS, BETHANI  
Address 169 WELLINGTON STREET SW  
City-State-Zip: ATLANTA GA 30314

*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:** CORNELIUS COACHMAN JR

MGR

01/02/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date