

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000076207

**Entity Name:** STAGE-IT SOLUTIONS, LLC

**Current Principal Place of Business:**

1761 W. LAUREL GLEN PATH  
HERNANDO, FL 34442

**Current Mailing Address:**

1761 W. LAUREL GLEN PATH  
HERNANDO, FL 34442 US

**FEI Number:** 83-4151746

**Certificate of Status Desired:** Yes

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

TATE, CRAIG  
1761 W. LAUREL GLEN PATH  
HERNANDO, FL 34442 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 TATE, CRAIG  
Address 1761 W. LAUREL GLEN PATH  
City-State-Zip: HERNANDO FL 34442

Title AMBR  
Name CAULFIELD, PATRICIA  
Address 1761 W. LAUREL GLEN PATH  
City-State-Zip: HERNANDO FL 34442

*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:** CRAIG TATE

AMBR

02/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date