

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000405267

**Entity Name:** IT FUSION, LLC

**Current Principal Place of Business:**

150 S. PINE ISLAND ROAD  
SUITE 300  
PLANTATION, FL 33324

**Current Mailing Address:**

150 S. PINE ISLAND ROAD  
SUITE 300  
PLANTATION, FL 33324 US

**FEI Number:** 35-2734139

**Certificate of Status Desired:** No

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

MCCARTHY BULMAN, MAURA  
1779 N. UNIVERSITY DRIVE  
SUITE 202  
HOLLYWOOD, 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 MGR  
Name THE CPU SQUAD, LLC  
Address 150 S. PINE ISLAND ROAD SUITE 300  
City-State-Zip: PLANTATION FL 33324

Title MGR  
Name MK TECH GROUP, INC.  
Address 8996 NW 40TH STREET  
City-State-Zip: CORAL SPRINGS FL 33065

Title MGR  
Name NITE OWL, INC.  
Address 5846 S. FLAMINGO ROAD SUITE 801  
City-State-Zip: COOPER CITY FL 33330

Title MGR  
Name O & A TECHNOLOGIES, INC.  
Address 1150 SW 118TH TERRACE  
City-State-Zip: DAVIE FL 33325

*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:** JEANINE KINSEY

**PARTNER**

**04/19/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date