

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000453503

**Entity Name:** TA SOLUTIONS LLC

**Current Principal Place of Business:**

7137 S US HIGHWAY 1  
PORT ST LUCIE, FL 34952

**Current Mailing Address:**

PO BOX 7835  
PORT ST LUCIE, FL 34985 US

**FEI Number:** 87-3161147

**Certificate of Status Desired:** No

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

LANEVE, RONNIE  
7137 S US HIGHWAY 1  
PORT ST LUCIE, FL 34952 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 MGRM  
Name LANEVE, RONNIE  
Address 2241 SE GOWIN DR  
City-State-Zip: PORT ST LUCIE FL 34952

Title AMBR  
Name KLATT, NATHAN  
Address 2961 SE CATES CIR  
City-State-Zip: PORT ST LUCIE FL 34952

*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:** RONNIE LANEVE

MGRM

04/19/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date