

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000001210

Entity Name: PCN SERVICES,LLC**Current Principal Place of Business:**126 N SALINA ST SUITE 320
SYRACUSE, NY 13202**Current Mailing Address:**126 N SALINA ST SUITE 320
SYRACUSE, NY 13202 US**FEI Number:** 83-3056634**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	MBR
Name	MARSALLO, JAMES JR.
Address	126 N SALINA ST SUITE 320
City-State-Zip:	SYRACUSE NY 13202

Title	MBR
Name	MARSALLO, JAMES
Address	126 N SALINA ST SUITE 320
City-State-Zip:	SYRACUSE NY 13202

Title	MBR
Name	MARSALLO, MICHAEL
Address	126 N SALINA ST SUITE 320
City-State-Zip:	SYRACUSE NY 13202

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: MICHAEL MARSALLO

MEMBER

03/30/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date