## **2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000003695

Entity Name: PROLOGIC ITS LLC

**Current Principal Place of Business:** 

7828 SW JACK JAMES DR BLDG 1/A

STUART, FL 34997

**Current Mailing Address:** 

106 NORTHPOINT PKWY BLDG 2 STE 350 ACWORTH, GA 30102 US

FEI Number: 46-4101495 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT LLC 7901 4TH ST N STE 300 ST PETERSBURG, FL 33702 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

Authorized Person(s) Detail:

Title Title **MBR MBR** 

Name CRAPPS, CHRIS Name PICKERING, JOHN JR

Address 106 NORTHPOINT PKWY Address 106 NORTHPOINT PKWY

BLDG 2 STE 350 BLDG 2 STE 350

City-State-Zip: ACWORTH GA 30102 City-State-Zip: ACWORTH GA 30102

Title **MBR** 

SPRAYBERRY, PAUL Name

Address 106 NORTHPOINT PKWY

BLDG 2 STE 350

City-State-Zip: ACWORTH GA 30102

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.

03/23/2021 SIGNATURE: CHRIS CRAPPS **MEMBER** 

Date

**FILED** Mar 23, 2021

**Secretary of State** 

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