

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098420

Entity Name: PROVISION TECHNOLOGY SOLUTIONS, LLC

Current Principal Place of Business:

291 DROSDICK DRIVE
CASSELBERRY, FL 32707

Current Mailing Address:

478 E ALTAMONTE DRIVE, SUITE 108-570
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 20-3578377

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHILLIPS, JOSEPH
478 E ALTAMONTE DRIVE, SUITE 108-570
ALTAMONTE SPRINGS, FL 32701 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: JOSEPH PHILLIPS

06/08/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name FITZGERALD, III, CHARLES E
Address 8348 AMBER OAK DRIVE
City-State-Zip: ORLANDO FL 32817

Title MGRM
Name PHILLIPS, BENNY
Address 912 ANTELOPE TRAIL
City-State-Zip: WINTER SPRINGS FL 32708

Title MGRM
Name PHILLIPS, SHEREE
Address 912 ANTELOPE TRAIL
City-State-Zip: WINTER SPRINGS FL 32708

Title MANAGING MEMBER
Name PHILLIPS, JOSEPH
Address 478 E ALTAMONTE DRIVE, SUITE 108-570
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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: JOSEPH PHILLIPS

OWNER

06/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date