

**2014 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L09000121946

**Entity Name:** SRG TECHNOLOGY, LLC**Current Principal Place of Business:**330 SW 2ND STREET  
SUITE #215  
FORT LAUDERDALE, FL 33312**Current Mailing Address:**330 SW 2ND STREET  
SUITE #215  
FORT LAUDERDALE, FL 33312**FEI Number:** 65-1317337**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, GARRY W  
330 SW 2 STREET  
SUITE 215  
FORT LAUDERDALE, FL 33312 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, PRESIDENT, CEO  
Name STERLING, NEIL  
Address 330 SW 2ND STREET, SUITE #215  
City-State-Zip: FORT LAUDERDALE FL 33312

Title MANAGER, CFO, VP  
Name MCNERNEY, KEVIN  
Address 330 SW 2ND STREET  
SUITE #215  
City-State-Zip: FORT LAUDERDALE FL 33312

Title MANAGER  
Name PIERSON, GAIL  
Address 330 SW 2ND STREET  
SUITE #215  
City-State-Zip: FORT LAUDERDALE FL 33312

Title MGR, VP, CHIEF ADMINISTRATIVE  
OFFICER  
Name HARTSELL, CANDACE  
Address 330 SW 2ND STREET, SUITE #215  
City-State-Zip: FORT LAUDERDALE FL 33312

Title MANAGER  
Name BLOSSER, JAMES  
Address 330 SW 2ND STREET  
SUITE #215  
City-State-Zip: FORT LAUDERDALE FL 33312

Title MANAGER  
Name MILLER, JAMES  
Address 330 SW 2ND STREET  
SUITE #215  
City-State-Zip: FORT LAUDERDALE FL 33312

*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:** NEIL STERLING

PRESIDENT

08/15/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date