

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000131143

**Entity Name:** STRONG SECURITY SOLUTIONS, LLC

**Current Principal Place of Business:**

3111-20 MAHAN DRIVE  
SUITE 119  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

3111-20 MAHAN DRIVE  
SUITE 119  
TALLAHASSEE, FL 32308

**FEI Number:** 47-1756305

**Certificate of Status Desired:** Yes

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

GEYER, GRANT  
3111-20 MAHAN DRIVE  
SUITE 119  
TALLAHASSEE, FL 32308 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 CFO  
Name GEYER, GRANT  
Address 3111-20 MAHAN DRIVE, SUITE 119  
City-State-Zip: TALLAHASSEE FL 32308

Title COO  
Name PRATTS, NOEL  
Address 3111-20 MAHAN DRIVE, SUITE 119  
City-State-Zip: TALLAHASSEE FL 32308

*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:** GRANT GEYER

CFO

01/08/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date