

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000065722

Entity Name: TECH SUPPORT JACKSONVILLE, LLC

Current Principal Place of Business:

515 GROVE PARK BLVD
JACKSONVILLE, FL 32216

Current Mailing Address:

PO BOX 16413
JACKSONVILLE, FL 32245 US

FEI Number: 47-3871061

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEST, MICHAEL S
515 GROVE PARK BLVD
JACKSONVILLE, FL 32216 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: MICHAEL BEST

01/07/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name BEST, MICHAEL
Address 515 GROVE PARK BLVD
City-State-Zip: JACKSONVILLE FL 32216

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 BEST

MANAGING PARTNER

01/07/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date