

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000104085

Entity Name: CAPITAL IT SOLUTIONS, LLC

Current Principal Place of Business:

8001 SARDIS CREEK LN
CHARLOTTE, NC 28270

Current Mailing Address:

8001 SARDIS CREEK LN
CHARLOTTE, NC 28270

FEI Number: 81-2793326

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEEBER, PATRICIA
10726 SPRING BUCK TRAIL
ORLANDO, FL 32825 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
Name JANEK, DANIEL
Address 8001 SARDIS CREEK LN
City-State-Zip: CHARLOTTE NC 28270

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: DANIEL JANEK

MANAGER

01/16/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date