

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000106119

Entity Name: 8BIT SOLUTIONS LLC

Current Principal Place of Business:

3567 POND RIDGE CT W
JACKSONVILLE, FL 32223

Current Mailing Address:

3567 POND RIDGE CT W
JACKSONVILLE, FL 32223 US

FEI Number: 81-2825515

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPEARRIN, KYLE F
3567 POND RIDGE CT W
JACKSONVILLE, FL 32223 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 SPEARRIN, KYLE F
Address 3567 POND RIDGE CT W
City-State-Zip: JACKSONVILLE FL 32223

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: KYLE SPEARRIN

MANAGING MEMBER

01/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date