

**2023 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M07000006483

**Entity Name:** LTS MANAGED TECHNICAL SERVICES LLC

**Current Principal Place of Business:**

6405 MIRA MESA BOULEVARD  
SUITE 200  
SAN DIEGO, CA 92121

**Current Mailing Address:**

6405 MIRA MESA BOULEVARD  
SUITE 200  
SAN DIEGO, CA 92121 US

**FEI Number:** 98-0549492

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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: MANAGER  
Name: BYRD, JIMMY D.  
Address: 14400 THE LAKES BOULEVARD  
BUILDING C SUITE 100  
City-State-Zip: PFLUGERVILLE TX 78660

Title: MANAGER  
Name: LOFARO, THOMAS  
Address: 6405 MIRA MESA BOULEVARD  
SUITE 200  
City-State-Zip: SAN DIEGO CA 92121

Title: MANAGER  
Name: PLUM, RYAN  
Address: 6405 MIRA MESA BOULEVARD  
SUITE 200  
City-State-Zip: SAN DIEGO CA 92121

Title: MEMBER  
Name: LTS SOLUTIONS (USA) LLC  
Address: 6405 MIRA MESA BOULEVARD  
SUITE 200  
City-State-Zip: SAN DIEGO CA 92121

*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:** THOMAS LOFARO

**MANAGER**

**07/18/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date