## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000022362

Entity Name: QUALITY LABOR MANAGEMENT, LLC

**Current Principal Place of Business:** 

4035 W. 1ST STREET SANFORD, FL 32771

**Current Mailing Address:** 

P.O. BOX 471207

LAKE MONROE. FL 32747

FEI Number: 20-8544830 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOCTOR, JAMES J 215 NORTH EOLA DRIVE ORLANDO, FL 32801 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

FILED Mar 16, 2015

**Secretary of State** 

CC7896434030

## Authorized Person(s) Detail:

Title MGR

Name LANG, MARK ASR
Address 4035 W. 1ST STREET
City-State-Zip: SANFORD FL 32771

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: MARK LANG MGRM 03/16/2015