

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000116400

Entity Name: SENSIBLE STAFFING LLC.

Current Principal Place of Business:

501 MAIN STREET
STE. 2
HAINES CITY, FL 33844

Current Mailing Address:

901 SHAWNA SHORES
HAINES CITY, FL 33844 US

FEI Number: 26-3914449

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCPHEE, MARK M
901 SHAWNA SHORES
HAINES CITY, FL 33844 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 LAFACE, RENEE
Address 901 SHAWNA SHORES
City-State-Zip: HAINES CITY FL 33844

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RENEE LAFACE

PRESIDENT

03/23/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date