

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000089345

Entity Name: XCLUSIVE STAFFING OF FLORIDA, LLC

Current Principal Place of Business:

8774 YATES DR SUITE 210
WESTMINSTER, CO 80031-6906

Current Mailing Address:

8774 YATES DR SUITE 210
WESTMINSTER, CO 80031-6906 US

FEI Number: 27-0946767

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 MGRM
Name ASTLEY, DIANE
Address 8774 YATES DR., SUITE 210
City-State-Zip: WESTMINSTER CO 80031

Title BENEFITS MANAGER
Name ELOMARI, HASSAN
Address 8774 YATES DR SUITE 210
City-State-Zip: WESTMINSTER CO 80031-6906

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: HASSAN ELOMARI

BENEFITS MANAGER

02/09/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date