## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000089345

Entity Name: XCLUSIVE STAFFING OF FLORIDA, LLC

**Current Principal Place of Business:** 

8774 YATES DRIVE SUITE 210

WESTMINSTER, CO 80031

## **Current Mailing Address:**

8774 YATES DRIVE **SUITE 210** WESTMINSTER, CO 80031 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

**FILED** Apr 28, 2024

**Secretary of State** 

4462940796CC

Authorized Person(s) Detail:

MANAGER, CEO Title Title MANAGER, CFO ASTLEY, DIANE GOLDMAN, BRITT Name Name Address 8774 YATES DRIVE Address 8774 YATES DRIVE SUITE 210

SUITE 210

WESTMINSTER CO 80031 WESTMINSTER CO 80031 City-State-Zip: City-State-Zip:

Title MANAGER, EXECUTIVE VICE

**PRESIDENT** 

BENSON, RANDY Name Address 8774 YATES DRIVE

**SUITE 210** 

WESTMINSTER CO 80031 City-State-Zip:

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: BRITT GOLDMAN **MANAGER** 

Electronic Signature of Signing Authorized Person(s) Detail

04/28/2024

Date