

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000121245

**Entity Name:** MHH STAFFING, LLC

**Current Principal Place of Business:**

211 CAROLINE STREET  
OFFICE  
CAPE CANAVERAL, FL 32920

**Current Mailing Address:**

211 CAROLINE STREET  
OFFICE  
CAPE CANAVERAL, FL 32920

**FEI Number:** 27-4017567

**Certificate of Status Desired:** No

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

WELLS, TEE  
211 CAROLINE STREET  
OFFICE  
CAPE CANAVERAL, FL 32920 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 WELLS, TEE  
Address 211 CAROLINE STREET, OFFICE  
City-State-Zip: CAPE CANAVERAL FL 32920

Title MGRM  
Name BRINSON, SHELLY  
Address 211 CAROLINE STREET, OFFICE  
City-State-Zip: CAPE CANAVERAL FL 32920

*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:** TEEL WELLS

**MGRM**

**04/17/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date