

**2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L14000018806

**Entity Name:** NURSES FIRST STAFFING, LLC.

**Current Principal Place of Business:**

3259 PROGRESS DRIVE  
UNIT 134  
ORLANDO, FL 32826

**Current Mailing Address:**

3259 PROGRESS DRIVE  
STE 134  
ORLANDO, FL 32826 US

**FEI Number:** 46-4774776

**Certificate of Status Desired:** Yes

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

BREWER, TREVOR  
620 N WYMORE ROAD  
UNIT 270  
MAITLAND, FL 32751 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:** TREVOR BREWER

09/14/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ELLIOTT, RONNIE  
Address 1817 CRESCENT BLVD.  
City-State-Zip: ORLANDO FL 32817

Title MGR  
Name MANUEL, RICHARD  
Address 1817 CRESCENT BLVD.  
City-State-Zip: ORLANDO FL 32817

Title MGR  
Name CORTEZ, ALVIN D  
Address 1817 CRESCENT BLVD.  
City-State-Zip: ORLANDO FL 32817

*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:** ALVIN CORTEZ

MGR

09/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date