

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000218192

**Entity Name:** TELLUS STAFFING, LLC

**Current Principal Place of Business:**

12287 HIGHWAY 49  
GULFPORT, MS 39503

**Current Mailing Address:**

PO BOX 3226  
GULFPORT, MS 39505

**FEI Number: 81-4562354**

**Certificate of Status Desired:** No

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

GORDON, THOMAS D  
997 INDUSTRIAL DRIVE  
CRESTVIEW, FL 32539 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 MR.  
Name GORDON, THOMAS DAVIS  
Address 12287 HIGHWAY 49  
City-State-Zip: GULFPORT MS 39503

*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: GORDON, THOMAS DAVIS**

**MANAGER**

**03/06/2019**

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

\_\_\_\_\_  
Date