

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000238272

Entity Name: DEALER WORKFORCE STAFFING LLC

Current Principal Place of Business:

315 S CALHOUN ST STE 850
TALLAHASSEE, FL 32301

Current Mailing Address:

315 S CALHOUN ST STE 850
TALLAHASSEE, FL 32301

FEI Number: 83-0938792

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOREHAND, JOHN W ESQ
315 S CALHOUN ST STE 850
TALLAHASSEE, FL 32301 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 MGR
Name FOREHAND, JOHN
Address 315 S CALHOUN ST STE 850
City-State-Zip: TALLAHASSEE FL 32301

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: JOHN FOREHAND

MANAGER

06/29/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date