2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000158482

Entity Name: STAFFER 4 YOU SERVICES, LLC.

Current Principal Place of Business:

121 ALHAMBRA PLAZA **SUITE 1500** CORAL GABLES, FL 33134

Current Mailing Address:

121 ALHAMBRA PLAZA **SUITE 1500** CORAL GABLES, FL 33134 US

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

PERERA, ESQ., AUGUSTO 121 ALHÁMBRÁ PLAZA **SUITE 1500** CORAL GABLES, FL 33134 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

Authorized Percen(c) Detail :

Authorized Person(s) Detail :				
	Title	AUTHORIZED MEMBER, MANAGER	Title	AUTHORIZED MEMBER, MANAGER
	Name	JAIMES, DELMA	Name	ALEMAN, CONSUELO MARIA
	Address	121 ALHAMBRA PLAZA, SUITE 1500	Address	121 ALHAMBRA PLAZA, SUITE 1500
	City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

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: JAIMES, DELMA

MANAGER

02/27/2024

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 27, 2024 Secretary of State 8927805832CC

Certificate of Status Desired: Yes

Date