

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000080129

**Entity Name:** STAFFIND, LLC

**Current Principal Place of Business:**

950 S. PINE ISLAND ROAD  
SUITE A-150  
PLANTATION, FL 33324

**Current Mailing Address:**

950 SOUTH PINE ISLAND ROAD  
SUITE A-150,  
PLANTATION, FL 33324 US

**FEI Number:** 88-1006036

**Certificate of Status Desired:** No

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

MONAWAR, ZACKY  
2000 METROPICA WAY  
408  
SUNRISE, FL 33323 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:** ZACKY MONAWAR

03/11/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ZACKY, MONAWAR  
Address 2000 METROPICA WAY  
UNIT 408  
City-State-Zip: SUNRISE FL 33323

*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:** ZACKY MONAWAR

MGR

03/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date