## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000312098

Entity Name: SPARTAN SAFETY SERVICES LLC

**Current Principal Place of Business:** 

1675 S. STATE ST.

STE. B

**DOVER, DE 19901** 

**Current Mailing Address:** 

1675 S. STATE ST.

STE. B

DOVER, DE 19901 US

FEI Number: 88-1371948 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 801 US HWY 1 N. PALM BEACH, FL 33408 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: NICK NICHOLS 06/05/2024

Electronic Signature of Registered Agent

Date

FILED Jun 05, 2024

**Secretary of State** 

7188690685CC

Authorized Person(s) Detail:

Title PRESIDENT Title TREASURER

Name HOLLOHAN, MITCHELL Name ROMKEY, TREVOR

Address 24 AKERLEY BLVD., UNIT 1 Address 24 AKERLEY BLVD., UNIT 1

City-State-Zip: DARTMOUTH NS B3B 1K3 City-State-Zip: DARTMOUTH NS B3B 1K3

Title SECRETARY Title AUTHORIZED REPRESENTATIVE

Name STEVENS, VALERIE Name CLEMENT, KRISTA
Address 1675 S. STATE ST. Address 1675 S. STATE ST.

STE. B

City-State-Zip: DOVER DE 19901 City-State-Zip: DOVER DE 19901

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.

STE. B