## 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000006655

Entity Name: TELAFORCE, LLC

**Current Principal Place of Business:** 

4008 LEGENDARY DRIVE, SUITE 600

DESTIN, FL 32541

## **Current Mailing Address:**

11921 FREEDOM DRIVE SUITE 900 RESTON, VA 20190 US

FEI Number: 81-3035243 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title Title CEO **SECRETARY** 

Name ROSE, LES Name GILES, JUDITH M

Address 4008 LEGENDARY DRIVE, SUITE 600 Address 11921 FREEDOM DRIVE

SUITE 900

City-State-Zip: DESTIN FL 32541 City-State-Zip: RESTON VA 20190

COO Title

Title **CFO** Name RAMIREZ, DAVID A

Name COPELAND, JONATHAN Address 110 WILD BASIN ROAD, SUITE 230

Address 11921 FREEDOM DRIVE City-State-Zip: AUSTIN TX 78746 SUITE 900

City-State-Zip: RESTON VA 20190

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: JUDITH M. GILES

Electronic Signature of Signing Authorized Person(s) Detail

**SECRETARY** 

04/29/2024

**FILED** Apr 29, 2024

**Secretary of State** 

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