

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094641

FILED
Jan 17, 2008
Secretary of State

Entity Name: SUPERIOR LABOR SERVICES II, LLC

Current Principal Place of Business:

4425 MARTIN HWY.
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1097
PALM CITY, FL 34991 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WILLIAMSON, JENNIFER L
555 COLORADO AVE.
STUART, FL 34994 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BROWN, MATTHEW S
Address: P.O. BOX 1097
City-St-Zip: PALM CITY, FL 34991 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: BROWN, BARRIE L
Address: PO BOX 1097
City-St-Zip: PALM CITY, FL 34991

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: BARRIE L. BROWN MGRM 01/17/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date