

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000117453

FILED
Jan 12, 2009
Secretary of State

Entity Name: MILLER'S WORKFORCE LLC

Current Principal Place of Business:

99 NW 183 STREET
116
MIAMI GARDENS, FL 33169

New Principal Place of Business:

Current Mailing Address:

99 NW 183 STREET
116
MIAMI GARDENS, FL 33169

New Mailing Address:

FEI Number: 26-3940429 **FEI Number Applied For** () **FEI Number Not Applicable** () **Certificate of Status Desired** (X)

Name and Address of Current Registered Agent:

MILLER, MARTINE
99 NW 183 STREET
116
MIAMI GARDENS, FL 33169 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: MGR () Delete
Name: MILLER, MARTINE
Address: 17741 NW 14 PL
City-St-Zip: MIAMI GARDENS, FL 33169

Title: MGRM () Delete
Name: MILLER, TIMOTHY
Address: 17741 NW 14 PL
City-St-Zip: MIAMI GARDENS, FL 33169

ADDITIONS/CHANGES:

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

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

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: MARTINE J. MILLER MGR 01/12/2009

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