

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000033277

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** FOUR POINT STAFFING LLC

**Current Principal Place of Business:**

17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

620 PEACHTREE STREET NE SUITE 311  
ATLANTA, GA 30308

**Current Mailing Address:**

620 PEACHTREE ST NE  
STE 311  
ATLANTA, GA 33470

**New Mailing Address:**

620 PEACHTREE STREET NE SUITE 311  
ATLANTA, GA 30308

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: P  
Name: PHILLIP, HERRON  
Address: 620 PEACHTREE ST NE, STE 311  
City-St-Zip: ATLANTA, GA 30308

Title: S, T  
Name: WOJCIEHOWSKI, NOELLE  
Address: 620 PEACHTREE STREET NE SUITE 311  
City-St-Zip: ATLANTA, GA 30308

I hereby 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: PHILLIP HERRON

P

04/30/2012

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