

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000175483

**Entity Name:** LABOR POOL LLC

**FILED**  
**Oct 03, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

419 NW 10 STREET  
HALLANDALE BEACH, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

419 NW 10 STREET  
HALLANDALE BEACH, FL 33009

**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:**

WRIGHT, MURVIN B  
419 NW 10 STREET  
HALLANDALE BEACH, FL 33009 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: MURVIN WRIGHT

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: WRIGHT, MURVIN B  
Address: 419 NW 10 STREET  
City-St-Zip: HALLANDALE BEACH, FL 33009

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: MURVIN WRIGHT

MGR

10/03/2014

Electronic Signature of Authorized Person

Date