

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000003690

Entity Name: SENSIBLE STAFFING II LLC

Current Principal Place of Business:

19 SOUTH 7TH STREET
HAINES CITY, FL 33844

Current Mailing Address:

901 SHAWNA SHORES
HAINES CITY, FL 33844

FEI Number: 45-4225831

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCPHEE, MARK M
901 SHAWNA SHORES
HAINES CITY, FL 33844 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR

Name LAFACE, RENEE S

Address 501 MAIN ST

City-State-Zip: HAINES CITY FL 33844

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: RENEE LAFACE

MANAGER

04/15/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date