

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000081294

Entity Name: INTREPID STAFF SUPPORT & CUSTOMER SERVICE LLC.

Current Principal Place of Business:

6996 PIAZZA GRANDE AVE
211
ORLANDO, FL 32835

Current Mailing Address:

PO BOX 164
GOTHA, FL 34734 US

FEI Number: 46-2919260

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORALES, ALEX
6996 PIAZZA GRANDE AVE
211
ORLANDO, FL 32835 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 MORALES, ALEX
Address 6996 PIAZZA GRANDE AVE
211
City-State-Zip: ORLANDO FL 32835

Title MANAGER
Name OLIVEIRA, JEANNIER
Address 6996 PIAZZA GRANDE AVE
211
City-State-Zip: ORLANDO FL 32835

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: ALEX MORALES JR

MANAGER

04/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date