

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000124107

**Entity Name:** A PLUS STAFFING SOLUTIONS LLC

**Current Principal Place of Business:**

4910 CARRANZA COURT  
TAMPA, FL 33616

**Current Mailing Address:**

4910 CARRANZA COURT  
TAMPA, FL 33616 US

**FEI Number:** 46-3577706

**Certificate of Status Desired:** No

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

WHITAKER, ALLISON  
4910 CARRANZA COURT  
TAMPA, FL 33616 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:** ALLISON WHITAKER

03/03/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name WHITAKER, ALLISON  
Address 4910 CARRANZA COURT  
City-State-Zip: TAMPA FL 33616

*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:** ALLISON WHITAKER

MANAGING MEMBER

03/03/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date