## 2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L15000204970

Entity Name: SHARPE HUMAN SOLUTIONS, LLC

**Current Principal Place of Business:** 

723 FLEMING STREET KEY WEST, FL 33040

**Current Mailing Address:** 

723 FLEMING STREET KEY WEST. FL 33040

FEI Number: 81-0767492 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHARPE, MARIA R 723 FLEMING STREET KEY WEST, FL 33040 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: MARIA RENNA SHARPE 10/22/2016

Electronic Signature of Registered Agent

Date

FILED Oct 22, 2016

**Secretary of State** 

CR6109287191

## Authorized Person(s) Detail:

Title AMBR

Name SHARPE, MARIA R
Address 723 FLEMING STREET
City-State-Zip: KEY WEST FL 33040

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: MARIA RENNA SHARPE

**SOLE MEMBER** 

10/22/2016