

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000036359

Entity Name: TRILOGY WORKFORCE SOLUTIONS, LLC

Current Principal Place of Business:

1016 TAMARIND WAY
BOCA RATON, FL 33486

Current Mailing Address:

1016 TAMARIND WAY
BOCA RATON, FL 33486

FEI Number: 81-2089567

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SARUBBI, JOSEPH T SR.
1016 TAMARIND WAY
BOCA RATON, FL 33486 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 SARUBBI, JOSEPH T SR.
Address 1016 TAMARIND WAY
City-State-Zip: BOCA RATON FL 33486

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: JOSEPH T. SARUBBI

MGR

02/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date