

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000180274

Entity Name: ORLANDO PLUS SECURITY & EVENT STAFFING LLC

Current Principal Place of Business:

7616 SOUTHLAND BLVD
108
ORLANDO, FL 32809

Current Mailing Address:

PO BOX 2869
JACKSON, WY 83001 US

FEI Number: 84-2526310

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH STREET N
SUITE 300
ST. PETERSBURG, FL 33702 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 BLACK OPS VENTURES LLC
Address PO BOX 2869
City-State-Zip: JACKSON WY 83001

Title VP
Name HAYWARD, CHRISTINE
Address 7901 4TH STREET N
SUITE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title PRESIDENT
Name CALLAGHAN, MICHAEL
Address 7901 4TH STREET N
SUITE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name WONG, TRISTAN
Address 7901 4TH STREET N
SUITE 300
City-State-Zip: ST. PETERSBURG FL 33702

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: BLACK OPS VENTURES LLC

MANAGER MANAGED

01/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date