

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000344304

Entity Name: CROSS PROFESSIONAL SERVICES & SECURITY LLC**Current Principal Place of Business:**3154 LAUREL RIDGE CIR
RIVIERA BEACH, FL 33405**Current Mailing Address:**3154 LAUREL RIDGE CIR
WEST PALM BEACH, FL 33405 UN**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CROSS, DANIKA
3154 LAUREL RIDGE CIR
RIVIERA BEACH, FL 33404 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:** DANIKA CROSS03/07/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|------------------------|
| Title | MGR |
| Name | CROSS, DANIKA |
| Address | 3154 LAUREL RIDGE CIR |
| City-State-Zip: | RIVIERA BEACH FL 33404 |

| | |
|-----------------|------------------------|
| Title | MGR |
| Name | DEAN, DANNY |
| Address | 3154 LAUREL RIDGE CIR |
| City-State-Zip: | RIVIERA BEACH FL 33404 |

| | |
|-----------------|------------------------|
| Title | MGR |
| Name | HOWARD, KELLY |
| Address | 3154 LAUREL RIDGE CIR |
| City-State-Zip: | RIVIERA BEACH FL 33404 |

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: DANIKA CROSSMANAGER03/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date