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: DENISE MORRIS	CEO	03/03/2024				

SIGNATURE: DENISE MORRIS

Electronic Signature of Signing Authorized Person(s) Detail

**Current Principal Place of Business:** 

Entity Name: ELITE HUMAN CAPITAL SERVICES, LLC

5379 LYONS RD #1781 COCONUT CREEK, FL 33073

DOCUMENT# L21000280579

## **Current Mailing Address:**

5379 LYONS RD #1781 COCONUT CREEK, FL 33073 US

## FEI Number: 87-1253092

## Name and Address of Current Registered Agent:

City-State-Zip: COCONUT CREEK FL 33073

#1781

MORRIS, DENISE D 5379 LYONS RD #1781 COCONUT CREEK, FL 33073 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:	DENISE MORRIS			03/03/2024
	Electronic Signature of Registered Agent			Date
Authorized Pe	erson(s) Detail :			
Title C	CEO	Title	VP	
Name M	MORRIS, DENISE	Name	MILLER, ZAMAR A	
Address 5	5379 LYONS RD	Address	5379 LYONS RD #1781	

City-State-Zip:

Certificate of Status Desired: No

COCONUT CREEK FL 33073

Secretary of State 8378790733CC

FILED Mar 03, 2024

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Date