

**2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000001755

**Entity Name:** ITEC II, LLC

**Current Principal Place of Business:**

100 MANPOWER PL  
MILWAUKEE, WI 53212

**Current Mailing Address:**

100 MANPOWER PL  
MILWAUKEE, WI 53212 US

**FEI Number:** 65-1278902

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEMS  
1200 S PINE ISLAND ROAD, SUITE 250  
PLANTATION, FL 33324 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:** HALEY SNAVELY

02/07/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGER, PRESIDENT  
Name NOBEL MCHALLAM, ERIKA  
Address 100 MANPOWER PL  
City-State-Zip: MILWAUKEE WI 53212

Title MANAGER, VP  
Name KLETZOK, STEVE  
Address 100 MANPOWER PL  
City-State-Zip: MILWAUKEE WI 53212

Title MANAGER, SECRETARY  
Name SMITH, MARTIN  
Address 100 MANPOWER PL  
City-State-Zip: MILWAUKEE WI 53212

Title AUTHORIZED REPRESENTATIVE  
Name NESMITH, JOSEPH  
Address 100 MANPOWER PL  
City-State-Zip: MILWAUKEE WI 53212

Title MEMBER  
Name MANPOWERGROUP PUBLIC SECTOR  
INC.  
Address 100 MANPOWER PL  
City-State-Zip: MILWAUKEE WI 53212

*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:** SHIRLEY LEMEROND

SENIOR CONTRACT  
ANALYST

02/07/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date