No. W 26074		Due no later than Sep 30, 2016	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705					
SECRETARY OF STATE							
700 WEST JEFFERSC PO BOX 83720 BOISE, ID 83720-008		KFORCE FLEXIBLE SOLUTIONS, LLC CINDY BECK 1001 EAST PALM AVE	BOISE ID 63705				
		TAMPA FL 33605	3. <u>New</u> Regist	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Comp	oanies: Enter Nar	nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	DAVE KELLY	1001 EAST PALM AVE	TAMPA	FL	USA	33605	
MANAGER	JEFF HACKM	AN 1001 E PALM AVE	TAMPA	FL	USA	33605	
MEMBER	ED SOTO	1001 E PALM AVE	TAMPA	FL	USA	33605	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
FL W 26074		Signature: ED SOTO	Date: 07/26/2016				
		Name (type or print): ED SOTO	Title: TREASURER				
Processed 07/26/2016		* Electronically provided signatures are accepted as original signatures.					