

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000187045

Entity Name: AKKODIS E&T, LLC

Current Principal Place of Business:

4800 DEERWOOD CAMPUS PARKWAY
BUILDING 800
JACKSONVILLE, FL 32246

Current Mailing Address:

4800 DEERWOOD CAMPUS PARKWAY
BUILDING 800
JACKSONVILLE, FL 32246

FEI Number: 81-4084225

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title VP OF FINANCE, TREASURER
Name RADFORD, TARA
Address 4800 DEERWOOD CAMPUS PARKWAY
BUILDING 800
City-State-Zip: JACKSONVILLE FL 32246

Title VP - TAX
Name ROBINSON, GERALD
Address 4800 DEERWOOD CAMPUS PARKWAY
BUILDING 800
City-State-Zip: JACKSONVILLE FL 32246

Title SECRETARY
Name HODGERSON, VANESSA
Address 4800 DEERWOOD CAMPUS PARKWAY
BUILDING 800
City-State-Zip: JACKSONVILLE FL 32246

Title PRESIDENT
Name CUTOLO, GENO
Address 4800 DEERWOOD CAMPUS PARKWAY
BUILDING 800
City-State-Zip: JACKSONVILLE FL 32246

Title SOLE MANAGING MEMBER
Name ADECCO USA INC
Address 4800 DEERWOOD CAMPUS PARKWAY
BUILDING 800
City-State-Zip: JACKSONVILLE FL 32246

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: GERALD ROBINSON

VP TAX

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date