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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

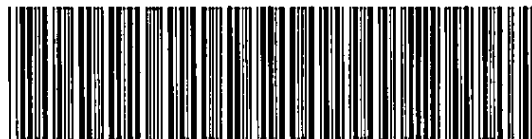
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
CORPORATIONS
20 JUN 19 AM 11:45

Amend

JUN 20 2019

DOCLINKING

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HireLink Staffing Solutions LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonathan Harris

Name of Person

HireLink Staffing Solutions LLC

Firm/Company

10916 NW 40th St.

Address

Sunrise, FL 33351

City/State and Zip Code

JJH1972@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonathan Harris

305 761-5460
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| ☒ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee &
Certificate of Status | ☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | ☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

20 NOV 19 AM 11:45

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STATE
DIVISION OF
CORPORATIONS

HireLink Staffing Solutions LLC

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Jonathan J. Harris	10916 NW 40th St.	☒ Add
		Sunrise, FL 33351	☐ Remove
			☐ Change
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[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated June 15th, 2020


Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Jonathan J. Harris

Typed or printed name of signee

Filing Fee: \$25.00