P04000026859

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ps 2/18/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Medical Staffing Solutions, Inc
(Name of corporation)

DOCUMENT NUMBER: P96000062689

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Licia Cader
(Name of person)

Medical Staffing Solutions, Inc
(Name of firm/company)

P.O. Box 30144
(Address)

Pensacola, FL 32503
(City/state and zip code)

For further information concerning this matter, please call:

Licia Cader at (850) 9411054
(Name of person) (Area code & daytime telephone number)

Enclosed is a $35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

CR2E045(09/03)

Articles of Amendment
to
Articles of Incorporation
of

FILED
04 FEB 18 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Medical Staffing Solutions Inc
(Name of corporation as currently filed with the Florida Dept. of State)

P96000062689
(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this ***Florida Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

Medical Staffing Solutions Nationwide Inc
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 2/17/04

Effective date if applicable: 02/17/04
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☑ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 17 day of February, 2004.

Signature _____
(By a director, president or other officer - if directors or officers have not been selected, by ~~an~~ incorporator ~~- if in the hands of a re~~ceiver, trustee, or other court appointed fiduciary by that fiduciary)

BARBARA J England - President
(Typed or printed name of person signing)

President / owner
(Title of person signing)

FILING FEE: $35