## F04000002127

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TALL AHASSEC FLORIDA SIVISION DE CORPORATIONS TALL AHASSEC FLORIDA

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CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE : 600784 7765516

AUTHORIZATION :

COST LIMIT

ORDER DATE: December 7, 2010

ORDER TIME : 2:52 PM

ORDER NO. : 600784-169

CUSTOMER NO: 7765516

CHANGE OF AGENT

\_\_\_\_\_\_\_

NAME: AMN STAFFING SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	-	0502, 607.1508, or 617.1508, Florida Statutes, this ganized under the laws of the State of Delaware
		ristered agent, or both, in the State of Florida.
1. The name of	the corporation: AMN STAFFING	SERVICES, INC.
2. The principal	Lastice address: 12400 High Bluff D	Orive, Suite 100, San Diego, CA 92130
2. The principa	Toffice address.	
3. The mailing	address (if different):	
4. Date of incor	rporation/qualification: 04/12/2004	Document number: F0400002127
	d street address of the current registered artment of State:	d agent and registered office on file with the
	NRAI Services, Inc.	
	2731 Executive Park Drive, Suit	e 4 = 5 = 5
	Weston, FL 33331	gent (if changed) and /or registered office
6. The name an (if changed):		gent (if changed) and /or registered office
	Corporation Service Company	FLORE ST.
	1201 Hays Street	
	(P.O. Box NOT accepta	ble)
	Tallahassee, FL 32301	
The street address changed will	ess of its registered office and the stro l be identical.	eet address of the business office of its registered agent,
Such change w authorized by t	as authorized by resolution duly adop he board, or the corporation has been	oted by its board of directors or by an officer so notified in writing of the change.
Bern	ea March	Blanca Lozada, Attorney in Fact
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent to comply with the provisions of all si nd I am familiar with and accept the c ing filed merely to reflect a change in s been notified in writing of this chan	(Printed or typed name and title)  and agree to act in this capacity, tatutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this the registered office address, I hereby confirm that the ge.
By: S	ion Service Company	December 8, 2010
	gnature of Registered Agent)	(Date)
If signing on be	ehalf of an entity:	
Grace E. Kirb	y, Assistant VP	
(	Typed or Printed Name)	

\* \* \* FILING FEE: \$35.00 \* \* \*