

FD-000003530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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JAN 23 2017

R. WHITE

(Pursuant to s. 607.1504, F.S.)

(1-3 MUST BE COMPLETED)

F06000003830

(Document number of corporation (if known))

Premier Staffing Services of New York Inc.

(Name of corporation as it appears on the records of the Department of State)

2. New York

(Incorporated under laws of)

3. 05/31/2006

(Date authorized to do business in Florida)

SECTION II

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 11/22/2016

5. HumanEdge, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Frank Cagliostro

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Frank Cagliostro

(Typed or printed name of person signing)

CFO

(Title of person signing)

17 JAN 17 AM 11:35
FBI - TAMPA



**Division of Corporations,
State Records and
Uniform Commercial Code**

New York State
Department of State
**DIVISION OF CORPORATIONS,
STATE RECORDS AND
UNIFORM COMMERCIAL CODE**
One Commerce Plaza
99 Washington Ave.
Albany, NY 12231-0001
www.dos.ny.gov

**CERTIFICATE OF AMENDMENT
OF
CERTIFICATE OF ASSUMED NAME
OF**

PREMIER STAFFING SERVICES OF NEW YORK, INC.

(Insert Real Name of Entity)

Under Section 130 of the General Business Law

FIRST: The real name of the entity is: Premier Staffing Services of New York, Inc.

SECOND: *Foreign entities only.* If applicable, the fictitious name the entity agreed to use in New York State is: _____

THIRD: If the real name of the entity is different on the last Certificate of Assumed Name or Certificate of Amendment of Certificate of Assumed Name, the previous name of the entity is: _____

FOURTH: The entity was formed or authorized under (indicate law):

- | | |
|--|--|
| <input checked="" type="checkbox"/> Business Corporation Law | <input type="checkbox"/> Not-for-Profit Corporation Law |
| <input type="checkbox"/> Education Law | <input type="checkbox"/> Revised Limited Partnership Act |
| <input type="checkbox"/> Insurance Law | <input type="checkbox"/> Other (specify law): _____ |
| <input type="checkbox"/> Limited Liability Company Law | |

FIFTH: The present assumed name is PREMIER GROUP

SIXTH: The date the original Certificate of Assumed Name was filed is: January 24, 2001

SEVENTH: The date, if applicable, the last Certificate of Amendment of Certificate of Assumed Name was filed is: _____

EIGHTH: The following change(s) are being made (check the appropriate change(s)):

- ☒ **Entity Name:**
The new name of the entity is: HUMANEDGE, INC.
- ☐ **Assumed Name:**
The new assumed name is: _____
- ☐ **Principal Place of Business:**
The principal place of business is changed to *(include the number and street, city, state and zip code)* : _____

CERTIFICATE OF AMENDMENT
OF CERTIFICATE OF ASSUMED NAME
OF

PREMIER STAFFING SERVICES OF NEW YORK, INC.

(Insert Real Name of Entity)

Under Section 130 of the General Business Law

Filer's Name: Premier Staffing Services of New York, Inc.

Address: c/o Axelrod Law Group, P.C. / 44 South Broadway, 14th Floor

City, State and Zip Code: White Plains, NY 10601

NOTES:

1. This form was prepared by the New York State Department of State. You are not required to use this form. You may draft your own form or use forms available at legal stationery stores.
2. The Department of State recommends that all documents be prepared under the guidance of an attorney.
3. **Filing Fee:**
 - a. Limited Liability Companies \$25.
 - b. Limited Partnerships - \$25.
 - c. Corporations - \$25 plus the additional fee for each county affected by the amendment. The additional fee for each county within New York City (Bronx, Kings, New York, Queens and Richmond) is \$100. The additional fee for each county outside New York City is \$25.
4. Checks are payable to the Department of State.
5. All checks over \$500 must be certified.

For Office Use Only

N. Y. S. DEPARTMENT OF STATE
DIVISION OF CORPORATIONS AND STATE RECORDS

ALBANY, NY 12231-0001

FILING RECEIPT

ENTITY NAME: HUMANEDGE, INC.

DOCUMENT TYPE: BIENNIAL STATEMENT AMENDMENT
CHIEF EXECUTIVE OFFICER LOCATION

COUNTY: NEWY

FILED:11/22/2016 DURATION:***** CASH#:161122002029 FILM #:161122002029

FILER:

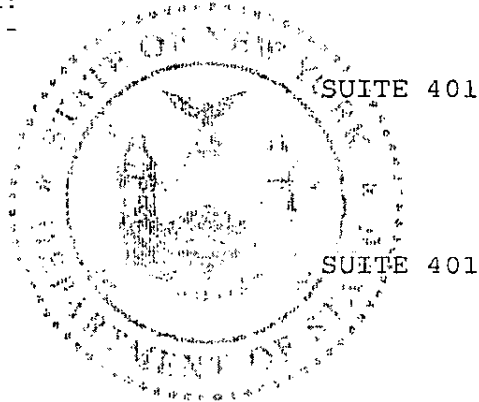
ADDRESS FOR PROCESS:

CHIEF EXECUTIVE OFFICER:

PAUL A SCHWABE
30 GLENN ST
WHITE PLAINS, NY 10603

LOCATION:

THE CORPORATION
30 GLENN ST
WHITE PLAINS, NY 10603



SERVICE CODE: 00

FEEs	9.00
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CASH	0.00
CHECK	9.00
CHARGE	0.00
DRAWDOWN	0.00
OPAL	0.00
REFUND	0.00

DOS-1025 (04/2007)