

To:  
Division of Corporations

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From: Kaity Toon

**F 1200005053**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (954) 208-0845  
Fax Number : (614) 573-3996

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
GOVERNMENTJOBS.COM, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

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SECRET  
TALLAHASSEE, FL

2022 JUL 15 PM 3:11

JUL 15 2022

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af 7/18/2022

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

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

2022 JUL 15 PM 3:11

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

FL2000005053

(Document number of corporation (if known))

1. Governmentjobs.com Inc.

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

2. California

3. 12/17/2012

(Incorporated under laws of)

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_

5. \_\_\_\_\_

(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. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent \_\_\_\_\_

\_\_\_\_\_  
 (Florida street address)

New Registered Office Address: \_\_\_\_\_

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:


I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
 Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Shave Evangelist	2120 Park Place, Suite 100	<input checked="" type="checkbox"/> Add
		El Segundo, CA 90245	<input type="checkbox"/> Remove
CFO	Alex Chun	2120 Park Place, Suite 100	<input checked="" type="checkbox"/> Add
		El Segundo, CA 90245	<input type="checkbox"/> Remove
Secretary	David Eisler	2120 Park Place, Suite 100	<input checked="" type="checkbox"/> Add
		El Segundo, CA 90245	<input type="checkbox"/> Remove
Secretary	Nicholas S. Wang	300 Continental Blvd, Suite 565	<input type="checkbox"/> Add
		El Segundo, CA 90245	<input checked="" type="checkbox"/> Remove
CFO	Stephen Koo	300 Continental Blvd, Suite 565	<input type="checkbox"/> Add
		El Segundo, CA 90245	<input checked="" type="checkbox"/> Remove

10. 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



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

Alex Chun

(Typed or printed name of person signing)

CFO

(Title of person signing)

FILING FEE \$35.00