

F14000001275

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

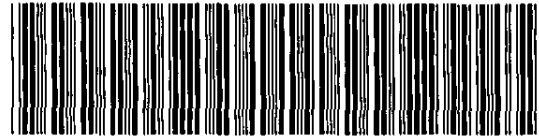
(Business Entity Name)

(Document Number)

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*Name Change &  
Amend*

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATE  
REGISTRATION  
15 JUN 15 PM 1:00  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED  
2015 JUN 15 PM 1:43  
DEPARTMENT OF STATE  
DIVISION OF CORPORATE  
REGISTRATION  
TALLAHASSEE, FLORIDA

JUN 16 2015  
RAMSEY

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302**

**155 Office Plaza Dr Ste A Tallahassee FL 32301**

**PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE: 6/15/15**

**NAME: ONE SOURCE VIRTUAL HR, INC.**

**TYPE OF FILING: AMENDMENT**

**COST: 43.75**

**RETURN: CERTIFIED COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

*Attache*

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** One Source Virtual HR, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F14000001275

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Capitol Services – Corporate Filings Team  
Name of Contact Person

Capitol Services, Inc.  
Firm/Company

800 Brazos Ste 400  
Address

Austin TX 78701  
City/State and Zip Code

aatkins@onesourcevirtual.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_ at ( 800 ) 345-4647  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
|---|---|---|---|

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

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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.)

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

F14000001275

(Document number of corporation (if known))

FILED  
JUN 15 PM 1:43  
TALLAHASSEE, FLORIDA

1. One Source Virtual HR, Inc.  
(Name of corporation as it appears on the records of the Department of State)
2. Texas (Incorporated under laws of) 3. 03/21/2014  
(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? 05/26/2015
5. OneSource Virtual, 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.

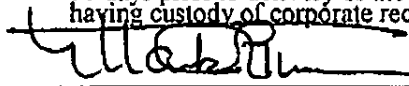
\_\_\_\_\_  
(New duration)

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

Delaware

\_\_\_\_\_  
(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.

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

Mark Turner

(Typed or printed name of person signing)

Chief Administrative Officer

(Title of person signing)

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE CERTIFICATE OF CONVERSION OF A TEXAS CORPORATION "ONE SOURCE VIRTUAL HR, INC." TO A DELAWARE CORPORATION OF "ONESOURCE VIRTUAL, INC.", WAS FILED IN THIS OFFICE ON THE TWENTY-SIXTH DAY OF MAY, A.D. 2015, AT 10:24 O'CLOCK A.M.



5753263 8317

150919069

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2463645

DATE: 06-15-15