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**Aug 05, 2002 8:00 am**  
**Secretary of State**

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4. FEI Number	65-1112861	Applied For
		Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

<b>DOCUMENT # L01000003305</b> <b>1. Entity Name</b> <b>INTERNATIONAL NURSES RECRUITING, LLC</b>			
<b>Principal Place of Business</b> <b>2875 SOUTH OCEAN BOULEVARD, SUITE 212</b> <b>PALM BEACH FL 33480</b>		<b>Mailing Address</b> <b>2875 SOUTH OCEAN BOULEVARD, SUITE 212</b> <b>PALM BEACH FL 33480</b>	
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent	
<b>SAUERBERG, ERIC M</b> <b>712 U.S. HIGHWAY ONE, SUITE 400</b> <b>NORTH PALM BEACH FL 33408</b>	Name <b>ROBERT ROSS</b>	
	Street Address (P.O. Box Number is Not Acceptable) <b>3140 SOUTH OCEAN BLVD</b>	
	City <b>PALM BEACH</b>	FL Zip Code <b>33480</b>


8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ☒ Robert Ross ROBERT ROSS - PRESIDENT ☒ 7/25/02  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**Due By September 25, 2002**

[illegible]

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: X SIGNATURE REC'D 7/25/52 ROBERT ROSS  (646)  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #  
282-0334

CR2E083 (4/02)