

W3 0000 13929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

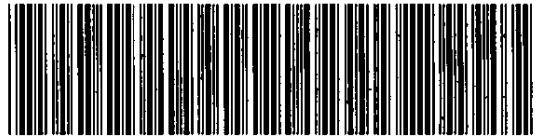
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100161445281

100161445281
10/08/09--01040--005 **30.00.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 OCT -8 AM 11:10

FILED

T. CLINE

OCT -9 2009

EXAMINER

To Whom It May Concern,

Enclosed are two documents with two checks.

The first to be processed is the Reinstatement of Diva Distributors International LLC with check for \$932.50.

Then, the next to be processed is an amendment name change for Diva Distributors International LLC to Recruiting Business LLC with check for \$30.00 (cert of status) → Please give to
Registration Section

The best number to reach me just in case is 321-438-5683 ☺

Kind Regards

Vanessa
321-438-5683 (mobile)

Thank you!!

FILED
2009 OCT -8 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DIVA DISTRIBUTORS INTERNATIONAL LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

VANESSA PENA

Name of Person

RECRUITING BUSINESS

Firm/Company

7431-34 W Atlantic Ave #146

Address

DELRAY BEACH, FL 33446

City/State and Zip Code

ADMIN@RECRUITINGBUSINESS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA PENA

Name of Person

at (561)

200-5952

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Florida Dept of State

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2009 OCT -8 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DIVA DISTRIBUTORS INTERNATIONAL LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/17/2003 and assigned
Florida document number L03000013929.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

RECRUITING BUSINESS LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

FILED	2009 OCT -8 AM 11:10	SECRETARY OF STATE TALLAHASSEE, FLORIDA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **Florida**

City

Zip Code

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

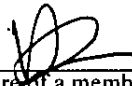
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 10/05, 2009



 Signature of a member or authorized representative of a member

 VANESSA PENA M

 Typed or printed name of signee