0700005729

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		MAIL		
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(Document Number)				
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COVER	LETTER
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TO: Registration Section Division of Corporations

SUBJECT: NurseLogix Staffing Solutions, 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:

Gary Sowder

(Name of Person)

(Firm/Company)

3800 River Lane

(Address)

Rocky River, OH 44116

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary Sowder

(Name of Person)

at (513) 910-5393

(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)

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



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

 NurseLogix Staffing Solutions, LLC
 Image: Staffing Solutions, LLC

 (Name of the Limited Liability Company as it now appears on our records.)
 Image: Staffing Solutions, LLC

 (A Florida Limited Liability Company were filed on January 16th, 2007
 Image: Staffing Solutions, LLC

 The Articles of Organization for this Limited Liability Company were filed on January 16th, 2007
 Image: Staffing Solutions, LLC

 Florida document number
 L07000005729
 Image: Staffing Solutions, LLC

This amendment is submitted to amend the following:

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

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

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

Name of New Registered Agent:	Gary Sowder - NIRR	SELOGIX		
New Registered Office Address:	1525 NW 3rd Street - Suite 5			
	(Enter Florida street address)			
	Deerfield Beach	, Florida 33442		
	(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)

5 40 6

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

MGR = Manager MGRM = Managing Member

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Title	Name	Address	Type of Action			
MGMR	James Sowder		Add Remove			
MGMR_	Gary Sowder	3800 River Lane Rocky River, OH 44116	Add Remove			
			Add Remove			
			Add Remove			
<u></u>			Add Remove			
	· <u>······························</u>		Add Remove			
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	DIVISION OF C			
			PH 2:			
Dated Februa	ry 25th, 2007	·				
_	A P Del	authorized representative of a member				
G	ary Sowder	printed name of signee				
Page 2 of 2						

Filing Fee: \$25.00