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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

J. BRYAN

JAN 31 2008

EXAMINER

COVER LETTER

TO: Registration Se Division of Con				
SUBJECT. Workers	' Temporary Staff Hold	ings, LLC		
SUBJECT:		nited Liability Company)	 	
				•
The enclosed Articles of	Amendment and fee(s) are sui	bmitted for filing.		
Please return all correspondent	ondence concerning this matter	r to the following:		
	James J. Martin III	(Name of Person)		
		(
		(Firm/Company)	, ,	
				SEIVIS
	5025 West Lemon S	(Address)	 	AN CRE
		,		30
	Tampa, FL 33609	(Cir.(Cr.), and 71- Cr.d.)	<u> </u>	3 39
		(City/State and Zip Code)		OB JAN 30 PM 1: 04
For further information of	concerning this matter, please of	call:		Or SHORE
James J. Martin III		at (813) 637-2230		
(Name of Person)		(Area Code & Daytime	Telephone Number)	
Enclosed is a check for t	<u> </u>	_		
\$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 Statu Certified Copy (additional copy is	
Registi Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURIEF Registration Section Division of Corporati Clifton Building		
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Cente Tallahassee, FL 3230		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF Workers' Temporary Staff Holdings, LLC

(Name of the Limited Liabh		
(A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	3
·	• • •	PA 1:0
The Articles of Organization for this Limited Liability	y Company were filed on May 4, 2007	and assigned.
Florida document number L07000047894		
This amendment is submitted to amend the following:		
This amendment is sublimited to amend the following.	•	
A. If amending name, enter the new name of the li	imited liability company here:	
Bubba Bean's Iron Works, LLC		
The new name must be distinguishable and end with the w	words "Limited Liability Company," the designation	"LLC" or the abbreviation
"L.L.C."		
B. If amending the registered agent and/or reg	sistered office address on our records, enter	the name of the new
registered agent and/or the new registered office ac	ddress here:	
		
Name of New Registered Agent:		
Name of New Registered Agent:	(Enter Florida street a	ddress)
Name of New Registered Agent:	(Enter Florida street a	ddress)
Name of New Registered Agent:		
Name of New Registered Agent:	(Enter Florida street a , Florida	ddress) (Zip Code)
Name of New Registered Agent: New Registered Office Address:	(Enter Florida street a , Florida, City)	
Name of New Registered Agent:	(Enter Florida street a , Florida, City)	
Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered	(Enter Florida street a , Florida _ (City)	(Zip Code)
Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agenthe provisions of all statutes relative to the proper	(Enter Florida street a, Florida (City) red Agent: nt and agree to act in this capacity. I further a and complete performance of my duties, and I	(Zip Code) gree to comply with am familiar with and
Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent agent the provisions of all statutes relative to the proper accept the obligations of my position as registered	(Enter Florida street a, Florida, Florida, City) red Agent: nt and agree to act in this capacity. I further a and complete performance of my duties, and I agent as provided for in Chapter 608, F.S. On	(Zip Code) gree to comply with am familiar with and this document is
Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent as registered agenthe provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the register	(Enter Florida street a	(Zip Code) gree to comply with am familiar with and this document is
Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent agent the provisions of all statutes relative to the proper accept the obligations of my position as registered	(Enter Florida street a	(Zip Code) gree to comply with am familiar with and this document is

(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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
MGR_	Bubba Clem	5025 West Lemon Street, Suite 200 Tampa, FL 33609	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE OLVISION OF CORPORATION OF CORPORATION OF CORPORATION OLD
Dated Janu	ary 21, <u>2008</u>		- .
	Signature of a member	gr authorized representative of a member	
	Thomas J. Bean	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00