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SECRETARY OF STATE TALLAHASSEE, FLORIDA

008 APR -7 PM 1:

## **COVER LETTER**

TO: Registration Section Division of Corporations	*
SUBJECT: MYER PRO STAFFING, 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:	
ENDER J. RODRIGUEZ	
(Name of Person)	
MYER PRO STAFFING, LLC	
(Firm/Company)	
1104 PLAZA DRIVE, SUITE 2	
(Address)	
KISSIMMEE, FL 34743	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
ENDER J. RODRIGUEZ at (407 ) 414-3510	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  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

tad I inhilitu f'ammanu an it maus annanua	
ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
Liability Company were filed on MAR	RCH 28, 2008 and assigned
3	
ollowing:	
e of the limited liability company here:	
with the words "Limited Liability Company	," the designation "LLC" or the abbreviation
d/or registered office address on ou office address here:	r records, enter the name of the new
N/A	
N/A	
N/A	er Florida street address)
N/A	er Florida street address)
	Liability Company were filed on MAR  Bollowing:  The of the limited liability company here:  with the words "Limited Liability Company  d/or registered office address on out

## 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 Resistered Agent)

LLAHASSEE TARY OF STALL

Page 1 of 2

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 **Title** <u>Name</u> <u>Address</u> **Type of Action** MGR\_ MILAGROS PADILLA 1104 PLAZA DRIVE ☐ Add ☐ Add Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A Dated APRIL 03 2008 Signature of a method or author

Typed or printed name of signee

Page 2 of 2
Filing Fee: \$25.00

**ENDER J. RODRIGUEZ** 

FILED