

110000055535

(Requestor's Name) (Address) (Address)	700189049567		
(City/State/Zip/Phone #)			
(Business Entity Name)	01/04/1101046018 **30.00		
(Document Number)			
Certified Copies Certificates of Status	2011 JAN		

Special Instructions to Filing Officer:

A. LUNT

JAN - 5 2010

EXAMINER

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COVER LETTER

O: Registration So Division of Co				
SUBJECT:	ES Staff	LLC		
	Name of Limi	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Daniel	S. Emmert Name of Person		
:	HES ST			
		1. Latte Rd. 5 Address	4: Le 206	2011 JA
	Orlando, F	City/State and Zip Code Dhes-staff o be used for future annual report not		2011 JAN -4 P
	Semmer + E-mail address: (1	hes-staff o be used for future annual report not	iffication)	
For further information	concerning this matter, please c	all:	nue"	.963
Joseph	Ma honey of Person	at (407) 666 - Area Code & Dayti	3 16 5 me Telephone Number	•
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	 ▼ \$30.00 Filing Fee &	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Stated ed) Certified Copy (additional copy	

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

The Articles of Organization for this Limited Liability Company were filed on May 24, 2010 and assigned Florida document number <u>L/00000 5553.5.</u> 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 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: Enter Florida street address City New Registered Agent's Signature, if changing Registered Agent:

If Changing Registered Agent, Signature of New 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.

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

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> **Type of Action Address** ☐ Add [′] Remove Add Remove } □ Add _ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Under Article V: One of the M .2010 Signature of a member or authorized representative of a member na hors Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00