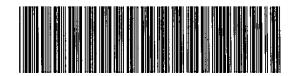
## L10000124337

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
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SECRETARY OF STATE
SECRETARY OF STATE

J. HARRIS

## COVER LETTER .

то:	Registration Section Division of Corporations			
SUBJE	All Star Recruiting Locums, LLC	0		
Name of Limited Liability Company				
Dear Si	г or Madam:			
The end	closed Registered Agent/Registered Office	Change and fe	e(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:				
Ken B	Bernstein			
	Name of Person		-	
All Sta	ar Recruiting Locums, LLC			
	Firm/Company		-	
800 F	airway Drive, Suite 300			
	Address		-	
Deerfi	ield Beach, FL 33441			
	City/State and Zip Code		-	
kbern	stein@allstarrecruiting.com			
E.	-mail address: (to be used for future annual	report notifica	ation)	
For furt	ther information concerning this matter, ple	ase call:		
Rebed	cca Zeitlin	954 at (	580-2368	
*****	Name of Person	,	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, Florida 32314	
Enclosed is a check for the following amount:				
	<b>☑</b> \$25 Filing Fee	<b>□</b> \$55	Filing Fee & Certified Copy	

INHS18 (2/14)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	lame of the limited liability company: All Star Recri		
2. (a)	6119 Lyons Road	(b) 6	119 Lyons Road
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Coconut Creek, FL 33073	<u>C</u>	oconut Creek, FL 33073
	03/07/2017	L1	0000124337
3.	Date of filing/registration in Florida	4.	Document number
5. (a	Keith Shattuck		
	Registered Agent and Registered Office shown on the records of	the Florida Dep	ot, of State:
	6119 Lyons Road		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
			\\ \tau_{\color \color \
	Coconut Creek	_33073	
(b)	Keith Shattuck		2011 MAY 15 SECRETARY TALLAHASS
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	800 Fairway Drive		F STATE FLORIDA
	NEW Registered Office Address:		DA -
	Suite 300		
	Deerfield Beach , FI	_33441	
the chagent was/v the ar Sign I her provi. the old to me	limited liability company is not organized under the language or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the ature of a member or authorized representative of a member elby accept the appointment as registered agent and agricular of all statutes relative to the proper and complete obligations of my position as registered agent as provide rely reflect a change in the registered office address, I sed in writing of this change.	f the registere iability compof the limited liability is a limited liability for the limited liability for the to act in a limited liability for the liabili	ed office and the business office of the registered rany, it is hereby confirmed that the change(s) if liability company or as otherwise provided in ility company.  Printed or typed name of signee  This capacity. I further agree to comply with the

Signature of Registered Agent