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SECRETARY OF STATE

COVER LETTER

то:	Registration Section Division of Corporations	, d
SUBJE	ст:Ozark Staffing, L	LC
	Name of Limited Liability Co.	mpany
Dear Si	r or Madam:	
The end	closed Articles of Correction and fee(s) are submitted for filing.	
Please 1	return all correspondence concerning this matter to the following	g:
	Jason Kieffer	
	Name of Person	-
	Ozark Staffing, LLC	
	Firm/Company	-
	_ 601 N Excelda Ave	
	Address	<u>.</u>
	Tampa, FL 33609	_
	City/State and Zip Code	_
	ozarketaffina@amail.com	
<u>E</u>	ozarkstaffing@gmail.com -mail address: (to be used for future annual report notification)	
For fur	ther information concerning this matter, please call:	
	Jason Kieffer at (813	391.4823
	Name of Person Area Co	de & Daytime Telephone Number
Registr Divisio Clifton 2661 E	ET/COURIER ADDRESS: ation Section n of Corporations Building xecutive Center Circle ssee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclose	ed is a check for the following amount:	
₹ 25	Filing Fee \$\ \text{Certificate of Status} \ \text{S55 Filing Fee & Certified Copy}	\$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

ARTICLES OF CORRECTION				
FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY				
Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.	27.4			
FIRST: The name of the limited liability company is: Ozark Staffing, LLC				
SECOND: The articles of organization or the application to transact business	S. F.			
(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT				
Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Jason Kieffer 601 N Excelda Ave Tampa FL 33609 listed as manager/member				
detail.				
EIN # 46-0878907				
OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:				
Dated: September 4				
Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)				

Electronic Articles of Organization For Florida Limited Liability Company

L12000111100 FILED 8:00 AM August 29, 2012 Sec. Of State kasaly

Article I

The name of the Limited Liability Company is:

OZARK STAFFING, L.L.C.

Article II

The street address of the principal office of the Limited Liability Company is:

1128 WINCHESTER RD # 140 LEXINGTON, KY. US 40505

The mailing address of the Limited Liability Company is:

1128 WINCHESTER RD # 140 LEXINGTON, KY. US 40505

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

CRAIG ROBINSON 1251 FLUSHING AVE CLEARWATER, FL. 33764

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: CRAIG ROBINSON

Signature of member or an authorized representative of a member

Electronic Signature: JASON KIEFFER

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.