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JUL 07 2015

3 MASON

June 25, 2015

Allison Tutwiler
President
A Plus Temps dba All Team Staffing
712 S. Oregon Avenue
Tampa, Florida 33606

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

To whom it may concern:

Please find the enclosed amendment for Name Change. If you have questions or concerns, please contact me directly at 813-833-1230

Sincerely,



Allison Tutwiler
President

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A PLUS TEMPS 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:

DANIEL D. WHITAKER
Name of Person

CAREY, O'MALLEY, WHITAKE & MUELLER
Firm/Company

710 S. OREGON AVENUE
Address

TAMPA, FL 33616
City/State and Zip Code

dwhitaker@cowmpe.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

ALLISON WHITAKER at (813) 833-1230
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 ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & 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**

A PLUS TEMPS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/03/2013 and assigned Florida document number 413000124107.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

A PLUS STAFFING SOLUTIONS LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

712 S. OREGON AVE

(Principal office address MUST BE A STREET ADDRESS)

TAMPA, FL 33606

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

New Registered Office Address:

N/A

Enter Florida street address

_____, Florida _____
City Zip Code

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 605, 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 Registered Agent

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TALLAHASSEE, FLORIDA

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
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This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. At the top left corner, there is a small, faint mark that looks like a staple or a hole punch. The paper appears to be part of a binder or a notebook.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

6/25/2015, _____

Allen Whitaker
Signature of a member or authorized representative of a member

ALISON WITTACEN
Typed or printed name of signee

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