

L13000165286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

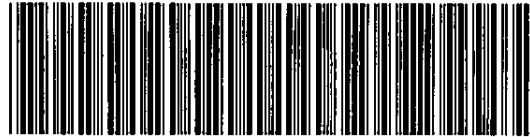
(Business Entity Name)

(Document Number)

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2013 DEC 26 AM 8:30  
CORPORATE STATE  
TALLAHASSEE, FLORIDA

1/13  
BA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **MND Staffing Solutions 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:

**Dana Scalione**

Name of Person

Firm/Company

**950 Brickell Bay Dr #3101**

Address

**Miami, FL 33131**

City/State and Zip Code

**danafl@hotmail.com**

E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call:

**Dana Scalione**

Name of Person

**305 509-9650**

at (

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

RECEIVED  
TALLAHASSEE, FL 32301

2013 DEC 26 PM 6:30

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MND Staffing Solutions 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 11/26/2013 and assigned  
Florida document number L13000165286.

This amendment is submitted to amend the following:

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

SUN STAFFING SOLUTIONS LLC

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

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 Dana Scalione

New Registered Office Address 950 Brickell Bay Dr #3101

Enter Florida street address

Miami Florida 33131

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.

[Signature]  
If Changing Registered Agent, Signature of New Registered Agent

**MGR = Manager**  
**AMBR = Authorized Member**

Title	Name	Address	Type of Action
	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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 OFF. INFO. DIV.  
 FBI LABORATORY

2003 DEC 26 PM 8:35  
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated Jan 13, 2014

Dana Scalione

Signature of a member or authorized representative of a member

Dana Scalione

Typed or printed name of signee