

L15000024271

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

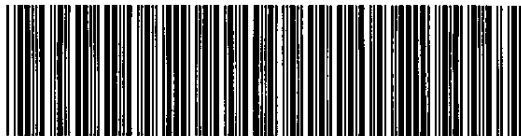
(Business Entity Name)

(Document Number)

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15 MAY 22 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 26 2015
T. HAMPTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Paramount Global Services L.L.C.
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:

Gregory Hole

Name of Person

Firm/Company

1842 Thoroughbred Drive

Address

Gotha, Florida 34734

City/State and Zip Code

gregoryhole1227@gmail.com

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

For further information concerning this matter, please call

Gregory Hole

Name of Person

at (407) 301-1633

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 21, 2015

GREGORY HOLE
1842 THOROUGHBRED DRIVE
GOTHA, FL 34734

SUBJECT: PARAMOUNT GLOBAL SERVICES, "LLC"
Ref. Number: L15000024271

We have received your document for PARAMOUNT GLOBAL SERVICES, "LLC" and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 015A00010814



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 29, 2015

GREGORY HOLE
1842 THOROUGHbred DRIVE
GOTHA, FL 34734

SUBJECT: PARAMOUNT GLOBAL SERVICES, "LLC"
Ref. Number: L15000024271

We have received your document for PARAMOUNT GLOBAL SERVICES, "LLC" and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 415A00008829

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Paramount Global Services 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 February 9, 2015 and assigned Florida document number L15000024271.

This amendment is submitted to amend the following:

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

Job-force Staffing 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)

2520 West Colonial Drive

Orlando, Florida 32804

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 585877

Orlando, Florida 32858

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:

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:

Page 1 of 3

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15 FEB 22 AM 11:00
TALLAHASSEE
STATE OF FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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"/> Add
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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

5/11/15

Langerine Hope

Signature of a member or authorized representative of a member

Langerine Hope

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

FILED
15 MAY 22 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA