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MAY 01 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

ALL PURPOSE STAFFING 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:

Hughy D. BALLINGER
Name of Person

ALL PURPOSE STAFFING LLC
Firm/Company

9951 ATLANTIC BLVD, STE 322A
Address

JACKSONVILLE, FL 32225
City/State and Zip Code

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

For further information concerning this matter, please call:

Hughy D. BALLINGER at (904) 219-1515
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

ALL PURPOSE STAFFING 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 08/12/2015 and assigned
Florida document number L 15008 137 989

This amendment is submitted to amend the following:

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

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:

(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:

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

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>
AMBR	Hughes DANIEL BALLINGER	9951 Atlantic Blvd	<input type="checkbox"/> Add
		Suite 322A	<input checked="" type="checkbox"/> Remove
		JACKSONVILLE, FL 32225	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Registered agent, mailing address, etc. is okay;

however, there should only be three (RMBR),
authorized person(s) detail as below:

JEMCO INVESTMENT PROPERTIES LLC
668 PONTE VEDRA BLVD
Ponte Vedra Beach, FL 32082

MJE INVESTMENT Properties LLC
668 PONTE VEDRA BLVD
Ponte Vedra Beach, FL 32082

GRANDS CONSULTING INC
10837 DELAWARE DRIVE
JACKSONVILLE, FL 32246

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
18 APR 30 PM 3:16

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

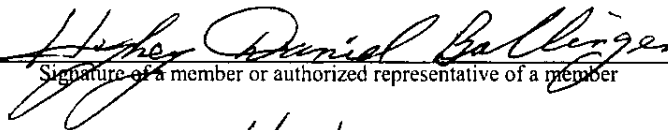
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated April 26, 2018.


Signature of a member or authorized representative of a member

Hybey DANIEL BALLINGER
Typed or printed name of signee