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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

submits the following statement in order to change its reg Florida. OFFICE TEA	5, Florida Statutes, the undersigned limited liability company gistered office or registered agent, or both, in the State of AMWORK SOLUTIONS LLC
1. Name of the Limited Liability Company:	
2. (a) 530 WOODSTEAD COURT	(b) 530 WOODSTEAD COURT
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Meiling address of limited liability company: (Note: MAY BE POST OFFICE BOX)
LONGWOOD, FL 32779	LONGWOOD, FL 32779
4/26/2016	L16000082308
3. Date of filing/registration in Florida	4. Docament number
5. (a) MARTIN, GREGORY P	
Registered Agent and Registered Office shown on the records of	
530 WOODSTEAD COURT	The Florida Dept. of State:
Registered Office Address MUST BE FLORIDA STREET	ADDRESSI SS &
LONGWOOD, FI	. 22770 T
(b) Capitol Corporate Services, Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	
515 East Park Avenue 2nd Fl	
NEW Registered Office Address:	
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Tallahassee, Fi	L_32301
agent will be identical. Or, in the case of a Florida limited I was/were authorized by an affirmative vote of the members the articles of organization or the operating agreement of the	inbility company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in c limited liability company.
Orlando Castillo	Orlando Castillo on behalf of the LLC Printed or typed name of signes
nungen n winne of wis change.	rease to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and accept ed for in Chapter 605, F.S. Or, if this document is being filed thereby confirm that the limited liability company has been
Manucesi Delan	ie Case, Assistant Secretary on
	f of Capitol Corporate Services, Inc.
Division of Corporations• P.O. FILING	Box 6327• Tallahassee, FL 32314 FEE: \$25.00
INHS18 (2/14)	

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