## 16000108056

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## **COVER LETTER**

Division of Corporations  USA Staffing Services of CA	A, LLC		
SUBJECT: Nam	e of Limited Li	ability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning thi	s matter to the f	following:	
William J. Schifino, Sr., Esq.			
Name of Person		_	
Burr & Forman LLP			SEC TALL
Firm/Company			JAN JUN 7
201 N. Franklin Street, Suite 3200			IN 16 PH
Address		<del></del>	EN PE
Tampa, FL 33602			PH II: 42 FRURIDA
City/State and Zip Code	<del></del>	_	
wjschifino@burr.com			
E-mail address: (to be used for future annual	ual report notifi	cation)	
For further information concerning this matter,	please call:		
R. Marshall Rainey, Esq.	813	221-2626	
Name of Person	_ at (	Area Code & Daytime Telepho	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following	amount:		
<b>☑</b> \$25 Filing Fee	<b>□</b> \$5	5 Filing Fee & Certified Copy	
INHS18 (2/14)	•		

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

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

·1. Na	ame of the limited liability company: USA Staffing	Services of CA, LLC		
2. (a)	3401 W. Cypress Street, Suite 202, Tampa, I	Fl (b) POB 18651, Tampa, FL 33679		
2. (u)	Principal office address of limited liability company:	Mailing address of limited liability company:		
	(Note: MUST BE STREET ADDRESS) 3401 W. Cypress Street, Suite 202	(Note: MAY BE POST OFFICE BOX)		
		POB 18651		
	Tampa, FL 33607	Tampa, FL 33679		
	June 3, 2016	L16000108056		
	Date of filing/registration in Florida	4. Document number		
(a)	Mark P. Curtiss, 3401 W. Cypress Street, Su	uite 202, Tampa,		
(a)	Registered Agent and Registered Office shown on the records of the	he Florida Dept. of State:		
	Mark P. Curtiss			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	3401 W. Cypress Street, Suite 202	TALS		
	Tampa	33607		
	NASIliana I Cabifara Ca Fara 204 N Farallia	TASSE		
(b)	William J. Schifino, Sr., Esq., 201 N. Franklin			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address: 고깃 골 다		
	Burr & Forman LLP, c/o William J. Schifino,	Sr. ST. 12		
	NEW Registered Office Address:	>		
	One Tampa City Center, Suite 3200			
	201 N. Franklin Street, Tampa , FL	33602		
e cha gent v as/we	inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia	ys of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered ibility company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in limited liability company.  R. Marshall Rainey, Esq.		
Signa	ture of a member or authorized representative of a member	Printed or typed name of signee		
herei rovisi ie obl	by accept the appointment as registered agent and agre	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept for in Chapter 605, F.S. Or, if this document is being filed tereby confirm that the limited liability company has been		
	Selles Schafere			
<b>vg</b> natu	re of Registered Agent			
	Division of Corporations • P.O. B FILING FI			