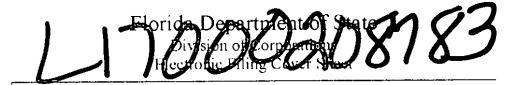
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Account Number : 120040000113 Phone : (305)358-6363 Fax Number : (305)358-1221

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NZR PERSONNEL, LLC			
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our record lability Company)	D.	
The Articles of Organization for this Limited Liability Company Florida document number £17000208783	were filed on OCTOBER 9, 20	917 and assigned	
This amendment is submitted to amend the following		至图 6	
A. If amending name, enter the new name of the limited liab	llity company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the cesignation "Li.C	or the abbreviation T. L.C.CO	
Enter new principal offices address, if applicable:	1665 ALTON ROAD	Fig. 2	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 200 (REAR ENTRAN	ICE)	
Principal office address (ACM) Int. A STREET (IDDRESS)	MIAMI BEACH, FL 33139	X.7. 0	
		9, 0	
Enter new mailing address, if applicable:	1665 ALTON ROAD		
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 200 (REAR ENTRANCE)		
finding sauverneys by 711 ggs at 1 ggs	MIAMI BEACH, FL 33139		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:	filee address on our records	s enter the name of the new	
New Registered Office Address:	Enter Florida street addres	5	
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	1		
I hereby accept the appointment as registered agen; and age provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ree to act in this capacity. I fin performance of my duties, as provided for in Chapter 605,	ia i am jamuiar wiin anu F.S. Or, if this document is	
If Cha	nging Registered Agent, Signature	of New Registered Agent	

Page 1 of 3

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 = N	danager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			Remove
			□ Change
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			□ Change

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one. If the date inserted in this bl	ack does not meet the applicab	to structory filling requirements	this date will not be listed as the
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record specifies a delayed	t effective date that not	on effective time, at 12:0	01 a.m. on the earlier of:
The 90th day after the rec	ord is filed.		
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	Signature of a member or authori	red represed after or sitt amount	

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