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(Re	equestor's Name)	
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COVER LETTER

Div	ision of Corp	oorations		
SUBJECT:	ADEX Trav	el RN's, LLC		
		Name of Limit	ted Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed	Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return	all correspor	ndence concerning this matter t	o the following:	
		Brian E. Langford, Esquire		
			Name of Person	
		Langford & Myers, P.A.		
			Firm/Company	
		1715 West Cleveland Stree	t	
			Address	
		Tampa, FL 33606		
			City/State and Zip Code	
		pam@langfordmyers.com		
		E-mail address: (to	o be used for future annual repor	t notification)
For further ir	iformation co	ncerning this matter, please ca	11:	
Brian E. Lan	igford, Esquii	re	813 251-55	
	Name of	Person	Area Code D	aytime Telephone Number
Enclosed is a	check for the	e following amount:		
□ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

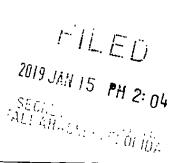
TO:

Registration Section

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



ADEX Travel RN's, 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 January 3, 2019 _ and assigned Florida document number L19000006253 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ADEX Healthcare Staffing, LLC 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

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

, Florida

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>	Name	Address	Type of Action
			Remove
			Change
			
			□ Rсточе
			Change
			□ Remove
			□ Change
			□ Add
			П Кеточе
			Change
			🗆 Add
		□ Kemove	
			□ Change
			D Add
			□ Rеточе
			□ Change

Effective date, If other than the date of filing: (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 405 0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed. Dated Taway I. Way L. Way I. Director		mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed. Dated Signature of a member or authorized representative of a member		
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Dated January 14 2019 Signature of a member or authorized representative of a member		
Signature of a member or authorized representative of a member	the re) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
ρ . ρ	Dated	January 14 2019
ρ . ρ		1111
ρ . ρ		Signature of a member or authorized representative of a member
		ρ . ρ .

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Filing Fee: \$25.00