-23000301261

(Requestor's Name)
(Address)
(Address)
,
(C): (C): (C): (C): (D): (D): (D): (D): (D): (D): (D): (D
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Endy Name)
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Account#: I20000000088 If there are any issues please contact Cheyanne at 850-202-1882

Date: 02/0)4/2025			
Name: CI	heyanne Davis			
Reference #:	2635293			
Entity Name:	ABS	STAFFING, LLC		
Articles of I	ncorporation/Authorization	on to Transact Business		
Amendmer	nt			
Change of	Agent			
Reinstatem	nent		2025 SEC TALL	
Conversion	1		5 FEB -4 CRETARY J AHASSE	7:
Merger			ARY ASSE	
Dissolution	Withdrawal			
Fictitious N	ame		2: 21 STATE LORID/	
Other				
Authorized Amour	nt: \$25.00			
Signature:	Unyma Paire			

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:ABS S	TAFFIN	IG, LL	C			_
2. (a)		(b)				
_, ,,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability co (Note: MAY BE POST OFFICE)				•	_
	No Change		No Char	nge			- -
	June 22, 2023	<u>-</u>	L	.23000301261			_
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	TOTTY, JEFFREY						
,	Registered Agent and Registered Office shown on the record	ls of the Florida	Dept. of State	e:			
	3020 HARTLEY ROAD						
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	!	_			
	SUITE 300						
	JACKSONVILLE	. Fl. 32257		-			
(b)	COGENCY GLOBAL INC.				351.0	20	
	Enter name of NEW Registered Agent and/or NEW Register	ered Office add	ress:	-	7 <u>8</u>	2025 F	
	115 North Calhoun St., Suite 4			_	AHASSET	FEB -4	F
	NEW Registered Office Address:					HQ 1	
			<u>. </u>	_	OF STATE	\sim	C
	Tallahassee	, FL_32301			Ď.	21	
the cha agent v was/w	limited liability company is not organized under the ange or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membericles of organization or the operating agreement of	ss of the regis ed liability cor ers of the limi	tered office mpany, it is ited liability	e and the business off s hereby confirmed th y company or as othe	fice of the ro hat the chan	egistere gc(s)	:i
	lake Odom		e Odom				
Signa	ture of a member or authorized representative of a member			Printed or typed name o	f signee		-
provisa the oba to mer	by accept the appointment as registered agent and jons of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address d in writing of this change.	lete performa	mce of my a	duties, and I am fami	liar with an	d $accen$) f

/s/ Timothy Mayville

Signature of Registered Agent Tir