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HIRE ED SOLUTIONS, LLC

TYPE OF FILING: CHANGE OF AGENT

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

Pursuant to the provisions of sections 605.0114, 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.

. Name of the limited liability company: H	RE ED SOLUTIONS, LLC	
2. (a) Principal office address of limited liab	iability company: 3101 W. Dr. Martin Luther King Jr. Blvd., Suite 200	
(Note: MUST BE STREET ADDRI	Tampa, FL 33607	
(b) Mailing address of limited liability co (Note: MAY BE POST OFFICE BU	X) Suite 200	
•	Tampa, Ft. 33607	
August 28, 2009	M0900003400	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Off	ce shown on the records of the Florida Dept. of State:	
Registered Agent:	CT Corporation System	
Registered Office Address:	1200 South Pine Island Road	
	Plantation, FL 33324	
	V 215115 1 1 200	
(b) Enter name of NEW Registered Age	nt and/or NEW Registered Office address:	
NEW Registered Agent:	National Corporate Research, Ltd., Inc.	
NEW Registered Office Address: (MUST BE FLORIDA STREET AD	155 Office Plaza Drive	
MOST BE PLONIDA STREET AL	Tallanassee FL 32301	
confirmed that after the change or changes ar and the business office of the registered agen liability company, it is hereby confirmed that	ed under the laws of the State of Florida, it is hereby e made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited the change(s) was/were authorized by an affirmative vote of or as otherwise provided in the articles of organization or y company.	
Signature of a member or authorized representative of a me	iber	
7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7	soughly of some wourper	
Printed or typed name of signee		
connly with the provisions of all statutes rel	d agent and agree to act in this capacity. I further agree to tive to the proper and complete performance of my duties, ions of my position as registered agent as provided for in ag filed to merely reflect a change in the registered office billy company has been notified in writing of this change.	
Signature of Registered Agent Lucy Rose, Assista	nt Socretor	
Division of Corporations	, P.O. Box 6327, Tallahassee, FL 32314	
INHS18 (12/13)	SEC 1323.00 SEC 13 1	