Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000010981 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SEATON, LLC

Certificate of Status	0
Certified Copy	0
Page Count	0274
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

JAN 2 1 2015

T HAMPTON

850-617-6381

1/20/2015 7:51:38 AM PAGE 1/001 Fax Server



January 20, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SEATON, LLC 860 WEST EVERGREEN CBICAGO, IL 60642

SUBJECT: SEATON, LLC REF: M12000001410

.

333 - 42, 25 - 5 - 6

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The required electronic filing cover sheet was not submitted with the document. Please resubmit the document with the electronic filing cover sheet.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) $245{\sim}6051$.

Tammy Hampton Regulatory Specialist III FAX Aud. #: H15000010981 Letter Number: 515A00001055

KECELVED 15 JAN 20 AM 10: 00 WHENLY SE SOLVED SHOW

P.O BOX 6327 - Tallahassee, Florida 32314

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

2. Jurisdiction of its t	organization: IL
3. Date authorized to	do business in Florida: 03/13/2012
SECTION II (4-7 eo	mplete only the applicable changes)
4. New name of the l	imited liability company: STAFF MANAGEMENT SOLUTIONS, LLC (most contain "Limited Liability Company, ""L.E.C.," or "1.1.0"
Staff Manageme	ent Services, LLC
the alternate name. The or "LLC.")	opy of the written consent of the managers or managing members adopting the alternate name must contain "Limited Liability Company," "L.L.C."
5. If the amendment (changes the jurisdiction of organization, indicate new jurisdiction:
6. If the amendment	changes the jurisdiction of organization, indicate new jurisdiction: changes person, title or capacity in accordance with 605.0902 (1)(e), indic
6. If the amendment that change: 7. Attached is an originatorementioned an	changes person, title or capacity in accordance with 605.0902 (1)(e), indic
6. If the amendment that change: 7. Attached is an originatorementioned an	changes person, title or capacity in accordance with 605.0902 (1)(e), indicestinal certificate, if required: no more than 90 days old, evidencing the nendment(s), duly authenticated by the official having custody of records the law of which this entity is organized.
6. If the amendment that change: 7. Attached is an originatorementioned an	changes person, title or capacity in accordance with 605.0902 (1)(e), indication in the second control of the sufficient c

File Number

0374787-5



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 13TH day of JANUARY A.D. 2015

Authentication #: 1501302099 verifiable until 01/13/2016. Authenticate at: http://www.cyberdriveifilnois.com

SECRETARY OF STATE