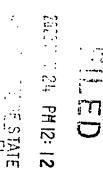
M12000005943

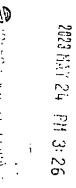
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500408344885





CT CORP

(850)656-4724 3458 Lakeshore Drive, Tallahassee, FL 32312

05/24/2023

Date:

4:1 DW

	Acc#I20160000072
Name:	MANAGED LABOR SOLUTIONS LLC
Document #:	
Order #:	14950783
Certified Copy of Arts & Amend: Plain Copy:	Please file as a 1-2 Amendment 157 - Audification 2nd
Certificate of Good Standing:	Amendement 157 - Qualification 2
Certified Copy of	
Apostille/Notarial Certification:	Country of Destination: Number of Certs:
Filing: 🗸	Certified: Email Address for Annual Report Notifications: Plain: COGS:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 25.00

Thank you!

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

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	s on the records of the Flo	rida Department of	
State: MANAGED LABOR SOLUTIONS, LLC	· 		
Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			(2)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			5··* 💆
2. The Florida document number of this limited li	ability company is: M1200	0005943	AIE 12
3. Jurisdiction of its organization: VA			
4. Date authorized to do business in Florida: 10/2	2/2012		
SECTION II (5-9 complete only the applicable 5. New name of the limited liability company: $\frac{N}{N}$ (must		y Company, " "L.L.	C.," or "LLC.")
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.	inaging members adopting	ting business in Flor the alternate name.	rida and attach a The alternate name
6. If amending the registered agent and/or register registered agent and/or the new registered office a	ed officer address on our r ddress here:	ecords, enter the nan	ne of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter 1	Florida Street Addre.	<u>ss</u>
	, Florida		
	City		Zip Code
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of t	ent and agree to act in this r and complete performand tered agent as provided fo r in the registered office an	ce of my duties, and it r in Chapter 605, F.,	t am familiar with S. Or, if this
	Changing Registered Agen	t, Signature of New	Registered Agent

itle/ Capacity	<u>Name</u>	Address	Type of Action
			DAdd
	_		
			□Add
	,		□Remove
			□Add
	_		□Remove
		<u></u>	
	_		□Remove
			□Add
Associated in a carrif	icate, if required: no more than 90 days	old, evidencing the	□Remov
aforementioned am	hendment(s), duly authenticated by the che law of which this entity is of eanised	official having custody of reco	rds in the
	ROBERT VITALE	autorized representative	21

4

**

Commonwealth of Hirginia



State Corporation Commission

1 Certify the Following from the Records of the Commission:

The foregoing are true and correct copies of business entity documents on file in the Office of the Clerk of the Commission related to MLS Outsourcing, LLC, a Virginia limited liability company.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

May 23, 2023

Bernard J. Logan, Clerk of the Commission

COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

AT RICHMOND, JULY 10, 2019

The State Corporation Commission has found the accompanying articles submitted on behalf of

MLS Outsourcing, LLC (formerly known as Managed Labor Solutions, LLC)

to comply with the requirements of law, and confirms payment of all required fees. Therefore, it is ORDERED that this

CERTIFICATE OF AMENDMENT

be issued and admitted to record with the articles of amendment in the Office of the Clerk of the Commission, effective July 10, 2019.

STATE CORPORATION COMMISSION

Ву

Judith Williams Jagdmann Commissioner



COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

ARTICLES OF AMENDMENT CHANGING THE NAME OF A VIRGINIA LIMITED LIABILITY COMPANY By the Members

The undersigned, on behalf of the limited liability company set forth below, pursuant to § 13.1-1014 of the Code of Virginia, states as follows:

. The current name of the limited liability company, as it appears on the records of the State			
Corporation Commission, is			
Managed Labor Solutions, LLC			
2. The name of the limited liability company i	is changed to		
MLS Outsourcing, LLC			
(The name must contain the words limited company or II	Inited Ilability company or the abbreviation L.C., LC, L.t.C. or LLC)		
3. (See "Approval" Instructions for requisite	e vote.) The foregoing amendment was adopted		
by a vote of the members in accordance	with the provisions of the Virginia Limited		
	28/2019		
(0	date)		
Executed in the name of the limited liability co	ompany by:		
That to	7/8/2019		
(eignature)	(dale)		
Robert Vitale	Manager		
(printed name)	(title (e.g., manager or member))		
S3669332			
(limited liability company's SCC ID no. (optional))	(telephone number (optional))		
CHECK IF APPLICABLE (see instructions):			
	on behalf of the limited liability company has bee		
delegated the right and power to man	age the company's business and affairs.		

(The articles must be executed in the name of the limited liability company by any manager or other person who has been delegated the right and power to manage the business and affairs of the limited liability company, or if no managers or such other person has been selected, by any member of the limited liability company.)

PRIVACY ADVISORY: Information such as social security number, date of birth, maiden name, or financial Institution account numbers is NOT required to be included in business entity documents filed with the Office of the Clerk of the Commission. Any information provided on these documents is subject to public viewing.



COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

Office of the Clerk

July 10, 2019

CAROLYN PETTIT REF#: 201907081621 THE PETTIT COMPANY 12807 ROSSMERE CT MIDLOTHIAN, VA 23114

RECEIPT

RE:

MLS Outsourcing, LLC

ID:

S366933 - 2

DCN:

19-07-09-1210

This receipt acknowledges payment of \$25.00 to cover the fee for filing articles of amendment for a limited liability company with this office.

Note: Prior to the effective date of this filing, the name of the above-referenced limited liability company was Managed Labor Solutions, LLC.

This receipt also acknowledges payment of \$100.00 to cover the fee for expedited service.

The effective date of the amendment is July 10, 2019.

If you have any questions, please call (804) 371-9733 or toll-free in Virginia, (866) 722-2551.

Sincerely,

Joel H. Peck

Clerk of the Commission

RECEIPTLC LCNCD CIS0368



The Pettit Company Inc

A Public Records Research Company www.pettitcompany.com

DATE: 07/08/19

REF NO: 201907081621

9366933-2 190709 1210 190709 B\$125

Please file the attached Corporate Document:

CORPORATE NAME: MANAGED LABOR SOLUTIONS LLC

TYPE OF FILING: ARTICLES OF AMENDMENT

Attached is our check number 15371 in the amount of \$125 to cover the filing fees.

PLEASE EMAIL! PLEASE DO NOT MAIL! PLEASE DO NOT MAIL! THANKS!

FF 5125 00 7/10/19

ANN MLS Outsourcing, LLC



SCC21.2 (03/19) COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION OFFICE OF THE CLERK 1300 E MAIN ST RICHMOND, VA 23219 (804) 371-9733 1-866-722-2551 Toll-free in Virginia

Expedited Service Request Form

This form MUST be completed and placed on top of EACH document submission (so it can be readily identified as a request for expedited review and processing).

			CCC ID No. 11	
Name of Co	rporation or Company (etc.): (Must be typed fo	er Email option.)	SCC ID No. (if known):	
	MANAGED LABOR SOLUTIONS LLC			
Customer Contact Information: Send Evidence of Expedited Filing By:				
	arolyn Pettit Ref#: 201907081621	(Choose <u>one</u>)	
Name:	<u> </u>	Email (On	ly available for Categories A, C and D)	
Th Company: _	ne Pettit Company	Two	typed originals of this form	
	2807 Rossmere Ct	<u>must</u> l	be submitted for Email option.	
Address:		See *F	Return of Evidence" in the Instructions.	
Mi	idlothian VA 23114	Hold for P	ickup (Available at 4:00 p.m.)	
	(city or town) (state) (zip code)	First-Class	s Maii	
T-16	(804) 379 2462 ext			
Telephone:		USPS Exp	oress Mail (Prepald envelope required.)	
Email:	RESULTS@PETTITCOMPANY.COM	Overnight		
(Completed waybill required. For Fed Ex. the waybill must be computer-generated with a barcode.)			s waybill required. For Fed Ex, the waybill omputer-generated with a barcode.)	
~~ See Inf	~~ See Information & Instructions for description of Categories. ~~ FOR OFFICE USE ONLY			
•		* Expedite Fee:		
(mark service re			190709 1210	
Category	 A Expedite Business Entity Document listed in Schedu Same Day Service (Received by 10:00 a.m.) 	le A \$ 200		
	Next Day Service (Received by 10.00 a.m.)	\$ 100		
		•		
Category	(2 nd Business Day Service Only – Received by 2:00			
	Resubmission within 30 Days of initial Pre-Review			
Category	y C Expedite Business Entity Document listed in Schedu	ile C \$ 50		
	(Next Day Service Only – Received by 2:00 p.m.)			
Category	y D Expedite Application for Reinstatement	\$ 50	\bigcap	
	(Next Day Service Only – Received by 2:00 p.m.)			

^{***} Submit one payment for all applicable fees (e.g., charter/entrance, reinstatement, filing and expedite fees)

05,016

07/10/19 CIS CIS0368 1 86 LLCM3220 LLC DATA INQUIRY 09:35:09 LLC ID: S366933 - 2 STATUS: 00 ACTIVE STATUS DATE: 06/07/19 LLC NAME: Managed Labor Solutions, LLC INDUSTRY CODE: 00 DATE OF FILING: 06/08/2011 PERIOD OF DURATION: STATE OF FILING: VA VIRGINIA MERGER INDICATOR: CONVERSION/DOMESTICATION INDICATOR: PRINCIPAL OFFICE ADDRESS STREET: 6550 REDWOOD LANE CITY: PRINCE GEORGE STATE: VA ZIP: 23875-0000 REGISTERED AGENT INFORMATION R/A NAME: JAMES M WILSON STREET: 5000 MONUMENT AVE. RTN MAIL: CITY: RICHMOND STATE: VA ZIP: 23230-0000

R/A STATUS: 4 MEMBER OF VSB EFF DATE: 04/05/17 LOC: 143 HENRICO COUNTY

YEAR FEES PENALTY INTEREST BALANCE

COMMAND:

19

4AÛ

50.00

CISO368 1 86	LLCM3240	CIS MICROFILM INQUIRY		07/10/19 09:35:12
		LLC STATUS: 00 ACTIVE olutions, LLC		ORDER/LINE #'S
COURT LOC	ALITY: 143 HENRICO	COUNTY		_
ORD SEL	18 10 22 2113 17 04 51 0330	DOCUMENT TYPE LLRE > LLC REINSTATEM CANC > CANCELLATION LLRA > LLC REGISTERED LLNC > NEW LLC	09/30/18	1
COMMAND: 4 AÛ				06,014