

Division of Corporations



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

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2015 AUG 12 AM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

RECEIVED
15 AUG 12 PM 5:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KOOSHAREM, LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

AUG 14 2015
12:00 PM
DUCE

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 appears on the records of the Florida Department of State: Koosharem, LLC
- 2. The Florida document number of this limited liability company is: M13000005687
- 3. Jurisdiction of its organization: California
- 4. Date authorized to do business in Florida: 09/10/2013

SECTION II (5-9 complete only the applicable changes)

- 5. New name of the limited liability company: Employbridge, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

- 6. 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

_____, Florida
City Zip Code

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 TALLAHASSEE, FLORIDA

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.

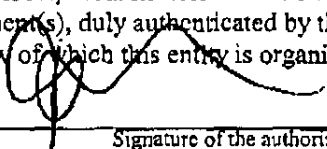
If Changing Registered Agent, Signature of New Registered Agent

- 7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



 Signature of the authorized representative
Jessica Morales, Attorney in Fact

 Typed or printed name of signee

Filing Fee: \$25.00

2015 AUG 12 A 9:53
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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State of California Secretary of State

Certificate of Filing of All Documents

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

Entity Name: EMPLOYBRIDGE, LLC

File Number: 201003210080
Conversion Date: 02/01/2010
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY
Jurisdiction: CALIFORNIA

All business entity documents recorded in this office for said entity are:

Document Type: FORMATION
File Date: 01/03/1989
Effective Date: 01/03/1989

Document Type: MERGER
File Date: 12/23/1991
Effective Date: 12/23/1991

Document Type: AMENDMENT
File Date: 02/11/1999
Effective Date: 02/11/1999

Document Type: STATEMENT OF INFORMATION
File Date: 05/12/2009
Effective Date: 05/12/2009

Document Type: STATEMENT OF INFORMATION
File Date: 01/12/2010
Effective Date: 01/12/2010

Document Type: MERGER
File Date: 02/01/2010
Effective Date: 02/01/2010

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Re: 201003210080

Document Type: CONVERSION
File Date: 02/01/2010
Effective Date: 02/01/2010

Document Type: CONVERSION
File Date: 02/01/2010
Effective Date: 02/01/2010

Document Type: STATEMENT OF INFORMATION
File Date: 05/23/2011
Effective Date: 05/23/2011

Document Type: STATEMENT OF INFORMATION
File Date: 04/01/2014
Effective Date: 04/01/2014

Document Type: AMENDMENT
File Date: 07/29/2015
Effective Date: 07/29/2015
Entity Name Changed From:
 KOOSHAREM, LLC

** **** * ***** End of list ***** **

State of California Secretary of State

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Re: 201003210080



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of California this
day of August 11, 2015.

ALEX PADILLA
Secretary of State

Go to www.sos.ca.gov/business/be for information about ordering
a copy of a filed document. HSD