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Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107 Phone : (561)694-1639

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

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

SECTION 1	I (1-4 must be complete	ed)		2
1. Name of limited liability Company as it appears	on the records of the Flo	orida Department of	第4	
State: RESOURCING EDGE FG	C, LLC			
Enter new principal office address, if applicable:			7570	à TO
(Principal office address MUST BE A STREET ADDRESS)				FILED 9:52
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				*
2. The Florida document number of this limited liab	ility company is:	1400005	582	
3. Jurisdiction of its organization:		<u></u>		
4. Date authorized to do business in Florida:	·	<u> </u>		
SECTION II (5-9 complete only the applicable of	hanges) air			
5. New name of the limited liability company: Re (must o	Sourcing Edge contain "Limited Liabili	2, LLC ty Company, " "L.L.C	.," or "LLC.")	
(If name unavailable, enter alternate name adopted if copy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C.	aging members adopting	cting business in Flori the alternate name. T	da and attech a he alternate nam	e
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	l officer address on our i <u>fress here:</u>	records, <u>enter the name</u>	e of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter.	Florida Street Address	•	
·	Ĉitv	, Florida	Zip Code	
Name Bandanand Amenda Girmanan (C.)	•		up cose	
New Registered Agent's Signature, if changing Reg. I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as register document is being filed to merely reflect a change in	t and agree to act in this and complete performan red agent as provided fo	ce of my duties, and I c or in Chapter 605. F.S.	am familtar with Or. if this	

liability company has been notified in writing of this change.

. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
e/ Capacity	<u> Матре</u>		Address	Type of Action	
		·	·	Type of Action	
				Remove	
<u> </u>				DAdd	
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				Remove	
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				Add	
				Remove	
aforementioned ar	ficate, if required: no m nendment(s), duly suthe the law of which this en	enticated by the	e official having custody of reco	ords in the	
	1)	authorized representative		

·A

Filing Fee: \$25.00

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Rolando B. Pablos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on February 06, 2017, Resourcing Edge FGC, LLC, a Domestic Limited Liability Company (LLC) (file number 801789684), changed its name to Resourcing Edge 2, LLC.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 08, 2017.



