

MI7000004997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

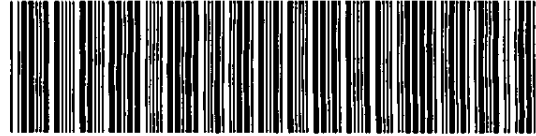
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/01/17--01020--024 **25.00

FILED
17 DEC - 1 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

DEC 05 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 5, 2017

CASSANDRA LOPEZ
5201 CONGRESS AVENUE, SUITE 100
BOCA RATON, FL 33487

SUBJECT: CAOC, LLC
Ref. Number: M17000004997

We have received your document for CAOC, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

NEED EITHER A CERTIFIED COPY OF THE AMENDMENT FILED IN DELAWARE OR A CERTIFICATE THAT HAS BOTH THE OLD NAME AND THE NEW NAME ON IT

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) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 017A00018310

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAOC, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cassandra Lopez

Name of Person

Cross Country Healthcare, Inc.

Firm/Company

5201 Congress Avenue, Suite 100

Address

Boca Raton, FL 33487

City/State and Zip Code

calopez@crosscountry.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cassandra Lopez

Name of Person

at (561) 998-2232

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**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: CAOC, LLC

Enter new principal office address, if applicable: _____

(Principal office address

MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address

MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M17000004997

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 6/12/17

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

5. New name of the limited liability company: Advantage On Call, 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 officer 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

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
_____	_____	_____	<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.

Susan E. Ball
Signature of the authorized representative

Susan E. Ball, Secretary

Typed or printed name of signee

Filing Fee: \$25.00

FILED
17 DEC -1 PM 12:32
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Delaware

The First State


Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "CAOC, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ADVANTAGE ON CALL, LLC" ON THE TWENTY-FIRST DAY OF JULY, A.D. 2017, AT 12:03 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ADVANTAGE ON CALL, LLC" WAS FORMED ON THE SIXTEENTH DAY OF MAY, A.D. 2017.




Jeffrey W. Bullock, Secretary of State

6413130 8320
SR# 20176849840

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203484447
Date: 10-30-17