

MI700007916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

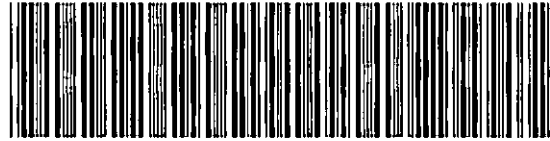
(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT
JAN 10 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 9, 2017

LINDSAY KOBBS
151 SOUTHHALL LANE
SUITE 150
MAITLAND, FL 32751

SUBJECT: NM STAFFING, LTD., LLC.
Ref. Number: M17000007916

*12/5/17
A certificate
of good standing
has been included
to be mailed*

We have received your document for NM STAFFING, LTD., 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 817A00022754

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TALLAHASSEE, FLORIDA

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2017 DEC 11 PM 12:14

TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NM Staffing, LTD, 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:

Lindsay Kobb

Name of Person

NM Residential, LLC

Firm/Company

151 Southhall Lane, Suite 150

Address

Maitland, FL 32751

City/State and Zip Code

lkobb@nmresidential.com

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

For further information concerning this matter, please call:

Eiliana Gonzalez

Name of Person

at (440)

331-8800 x17
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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**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: NM Staffing LTD, LLC.

Enter new principal office address, if applicable: 151 Southhall Lane, Suite 150

(Principal office address

MUST BE A STREET ADDRESS)

Maitland, FL 32751

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

151 Southhall Lane, Suite 150

Maitland, FL 32751

2. The Florida document number of this limited liability company is: M17000007916

3. Jurisdiction of its organization: Ohio

4. Date authorized to do business in Florida: 04/01/2017

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

5. New name of the limited liability company: ~~NM Staffing, 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.

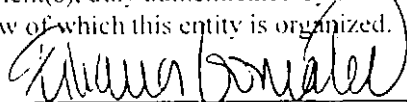
If Changing Registered Agent, Signature of New Registered Agent

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>
<u>Executive Assistant</u>	<u>Lindsay Kobb</u>	<u>151 Southhall Lane, Suite 150, Maitland, FL 32751</u>	<input checked="" type="checkbox"/> Add
		<u>21400 Lorain Ave, Fairview Park, OH 44126</u>	<input checked="" type="checkbox"/> Remove
<u>Vice President</u>	<u>Shawn Whiteman</u>	<u>151 Southhall Lane, Suite 150, Maitland, FL 32751</u>	<input checked="" type="checkbox"/> Add
		<u>21400 Lorain Ave, Fairview Park, OH 44126</u>	<input checked="" type="checkbox"/> Remove
<u>HR Director</u>	<u>Eiliana Gonzalez</u>	<u>151 Southhall Lane, Suite 150, Maitland, FL 32751</u>	<input checked="" type="checkbox"/> Add
		<u>21400 Lorain Ave, Fairview Park, OH 44126</u>	<input checked="" type="checkbox"/> Remove
<u>Member</u>	<u>Adrina Niederst</u>	<u>151 Southhall Lane, Suite 150, Maitland, FL 32751</u>	<input checked="" type="checkbox"/> Add
		<u>21400 Lorain Ave, Fairview Park, OH 44126</u>	<input checked="" 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

Eiliana Gonzalez

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00