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(R	Requestor	's Name)		
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PICK-UP		WAIT		MAIL
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Certified Copies		Certificates	of Status	
Special Instructions to Fi	ling Office	er:		

Office Use Only



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ED RECEIVED

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 91:831.9 8422358
AUTHORIZATION
COST LIMIT : \$ 25.00
ORDER DATE : August 3, 2023
ORDER TIME : 1:26 PM
ORDER NO. : 918319-025
CUSTOMER NO: 8422358
CHANGE OF AGENT
NAME: POWER LABOR STAFFING, LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1	Na	me of the limited liability company:	POWER LABOR STAFFING, LLC								
		206 W. Main Street, Suite 111		(b)							
2. (a)		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_ (0)_	M	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BQX)					
		Round Rock, TX 78664						_			
		08/23/2022		M2	2000013	234					
3.		Date of filing/registration in Florida		4.	1	Document number					
5.	(a)	C T Corporation System									
٥.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:									
		1200 South Pine Island Road				 ער	- (:= (20			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				, רר א:	TATAMASSEE.	2023 AUG	77		
		Plantation	, FL	33324) (7.2.Y	5	П		
ı	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW I</u>			<u></u>		FLORIDA	AM 9: 53	Ö		
		Corporation Service Company									
		NEW Registered Office Address:									
		1201 Hays Street									
		Tallahassee	, FL	32301							
cha age	inge ent v s/we arti	imited liability company is not organized und or changes are made, the Florida street addre vill be identical. Or, in the case of a Florida l ere authorized by an affirmative vote of the m cles of organization or the operating agreeme	ess of the imited lia embers o	registered o bility compa f the limited limited liabi	mice and any, it is Hiability lity comp	hereby confirmed the company or as other company.	bat the	change	e(s)		
		/ Jill Cilmi	<u> </u>	Jill Ciln		rized Person Printed or typed name of	of signe				
I h pro the	erel visi obl	the of a member or authorized representative of a membry accept the appointment as registered agent ons of all statutes relative to the proper and contains of my position as registered agent as the proper of the registered office and it is writing of this change.	t and agre complete p provided dress, I h	ee to act in to performance I for in Chap ereby confir rporation	his capac of my di oter 605, on that th				ith the accept g filed Seen		
Sig	natu	re of Registered Agent				t. Vice Presiden	t				