### Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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Division of Corporations

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March 24, 2014

# FLORIDA DEPARTMENT OF STATE Division of Corporations

EQUISTAFF, INC.

\*\*E-FILE\*\*GILLIGAN, GOODING & FRANJOLA\*\*

OCALA, FL 34478

SUBJECT: EQUISTAFF, INC.

REF: P00000021682

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please submit pages 2 and 3 of the Florida For Profit Articles of Amendment.

All pages must be submitted to this office for processing.

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) 245-6050.

Tina D Carter Regulatory Specialist FAX Aud. #: B14000068762 Letter Number: 614A00006277

HECENED 14 MR25 M 2:50 FEMILY STATES

Articles of Amendment to Articles of Incorporation of

EQUISTAFF, INC.	
(Name of Corporation as currently filed with the Flo	rida Dept. of State)
P00000021682	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1025 SE 14TH ST
(Principal office address MUST BE A STREET ADDRESS)	OCALA, FL 34471
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stree	t address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, If changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with  Signature of New Registered Agent.	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doc	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Chock One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			,
Add		•	
Remove			
3) Change			
Add			
Remove			
4) Change	٠		
Add			
Remove			<u> </u>
5) Change			
Add			
Remove			
		•	
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Se specific)
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.
(if not applicable, indicate N/A)	endment if not contained in the amendment itself;
(if not applicable, indicate N/A)	endment if not contained in the amendment itself;
(if not applicable, indicate N/A)	endment if not contained in the amendment itself;
(if not applicable, indicate N/A)	endment if not contained in the amendment itself;
(if not applicable, indicate N/A)	endment if not contained in the amendment itself;
(if not applicable, indicate N/A)	endment if not contained in the amendment itself;
(if not applicable, indicate N/A)	endment if not contained in the amendment itself;

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
_		
Effective date <u>[[npolicable</u> :	(no more than 90 days after omendment file date)	···
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) washvere a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 3	60/14	
Signature	Many 10 2	
selec	director, president or other officer — if directors or officers have not been ted, by an incorporator — if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	_
	MARY K THOMAS	
	(Typed or printed name of person signing)	<del>_</del>
	PRESIDENT	
	(Title of person signing)	<del></del>