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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	STREAMLINE HR, INC	<u>D</u>
DOCUMENT N	JMBER:	PO2000048985	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		SAM VAZQUEZ	·
	Name of Contact Person		
STREAMLINE FINANCIAL SERVICES		<u>.</u>	
	Firm/ Company		
	PO BOX 6023		
	Address		
	BF	RANDON, FL 33508	
	C	ity/ State and Zip Code	
	streamli E-mail address: (to be use	nehr@yahoo.com d for future annual report notification)	
	ation concerning this matter,	•	
	SAM VAZQUEZ	at (<u>813</u>) 689-T Area Code & Daytime Tele	AXX (8299)
Name	of Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depart	ment of State:
2 \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A		Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee FL 32314		2661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

11 Aug	ED
11 AUG 11 ECRETADO	AM //: 49

STREAMLINE HR, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

PO2000048985

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

STREAMLINE FIN	NANCIAL SE	RVICES, INC.	The	e new
name must be distinguishable and contain tabbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "C	Corp," "Inc," or "C	Co". A professional corpor	
B. Enter new principal office address, if apple (Principal office address MUST BE A STREE				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		STREAMLINE	FINANCIAL SERVICES	S, INC.
		PO BOX 6023 BRANDON, FL	33508	
D. If amending the registered agent and/or renew registered agent and/or the new registered.			a, enter the name of the	
Name of New Registered Agent:		 		
New Registered Office Address:	(Flor	ida street address)		
-	(City)		, Florida, Zip Code)	-
New Registered Agent's Signature, if changin I hereby accept the appointment as registered as			ot the obligations of the posi	ition.
Si	ionature of New	Registered Agent.	if changing	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add☐ Remove
			☐ Add ☐ Remove
	ng or adding additional Articles, e itional sheets, if necessary). (Be s		
F. If an ame	ndment provides for an exchange	, reclassification, or cancel	lation of issued shares,
	s for implementing the amendmen		
(if not	applicable, indicate N/A)		
			

The date of each amendmen	t(s) adoption: 08	B/10/11
Effective date <u>if applicable</u> :		(date of adoption is required)
	(no more than	90 days after amendment file date)
Adoption of Amendment(s)	(CI	HECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s) approval.
		he shareholders through voting groups. The following statemen g group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amer	ndment(s) was/were sufficient for approval
by		,,,
,	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	e board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	e incorporators without shareholder action and shareholder
Dated	08/10/11	
Signature _ (By sele	y a director, presidented, by an incor	dent or other officer - if directors or officers have not been reporator - if in the hands of a receiver, trustee, or other court by that fiduciary)
	SA	M VAZQUEZ pped or printed name of person signing)
	(Ту	pped or printed name of person signing)
	Pr	resident
	(Title o	of person signing)