## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305) 634-3694 Fax Number : (305) 633-9696

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN HUMAN RESOURCES STAFFING OF MIAMI, INC.

Certificate of Status	0
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Corporate Filing Menu

EMPIRE CORP

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T. BROWN

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PAGE 01/06

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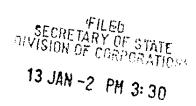
## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: Human Res	ources Staffing	of Miami, Inc.	
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		Name of Contact Perso.	-	
_	Human Re	sources Staffin	g of Miami, Inc.	
		Firm/ Company		
	915	NW 1st Avenue	e, Bay 3A	
		Address		
		Miami, FL 3313	<b>36</b> ·	
_		City/ State and Zip Cod	le .	
	somoaka@l	numanresources	staffing.com	
	E-mail address: (to be us	ed for future annual repor	notification)	
For further information	concerning this matter, pleas	e call:		
Shanee	tha Omoaka	786	, 441-9310	
Name of	Contact Person		ode & Daytime Telephone Number	
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S35 Piling Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	U\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ing Address		Address	
-,	ion of Corporations	Amendment Section		
	Box 6327		op of Corporations n Building	
	hassec, FL 32314		Executive Center Circle	
,		Tallahassee, FL 32301		

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EMPIRE CORP.



## Articles of Amendment to Articles of Incorporation

10

Human Resources Statting of Miami, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
P05000142653
(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:
A. If amending name, enter the new name of the corporation:
Human Resources of Miami, Inc.
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co., or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter now mailing address, if anglicables (Mailing address MAY HE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florids, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florida street address)
· · · · · · · · · · · · · · · · · · ·
New Registered Office Address: (City) Yorida (Zig Cods)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

Page 1 of 4

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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first latter of each affice held. President, Treasurer. Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mikz 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.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1)Change			
Add			
Remove	•		
2)Change	<del></del> -		
Add			
Remove	•		
3) Change			 
Add			
Rsmov	e		
4)Change			 
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5) Change			 
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Remov	re		
6)Change			
Add	<del></del>		
Remov	·-		<del></del>
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Page 2 of 4

	adding additional Articles and sheets, if necessary).	(Be specific)			
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Page 3 of 4

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The date of each amendment(s) adoptions
Effective date     Applicable:
(no mare than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 12 12 1772
Signature
(By a director, president or prices officer - if directors or officers have not been
selected, by an incorporator if in the bands of a receiver, trustee, or other court
appointed fiductary by that fibuciary)
Shaneetha Omogka
(Typed or printed name of person signing)
Secretary
(Title of person signing)

Page 4 of 4