P05000/58678

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06/02/06--01034--003 **35.00

Amend



COVER LETTER

TO: Amendment Section Division of Corporations

NAME-OF COR	PORATION: MERCY ME	EDICAL STAFFING, INC	:.
DOCUMENT N	UMBER:P05000153678	3	
The enclosed Arti	icles of Amendment and fee	are submitted for filing.	
Please return all c	orrespondence concerning t	this matter to the following:	
	OMOLOLA KOMO		
	(Nam	e of Contact Person)	
	MERCY MEDICAL	STAFFING, INC.	
	(I	Firm/ Company)	
	19001 FISHERMA	NS BEND DRIVE	
		(Address)	
	LUTZ, FL 33558		
	(City/	State/ and Zip Code)	
For further inform	ation concerning this matter	r, please call:	
OMOLOLA KO		at (813) 949-	4972
(Nam	e of Contact Person)	(Area Code & Daytin	ne Telephone Number)
Enclosed is a chec	k for the following amount:		
` 岱\$3 5 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Street Address Amendment Sect Division of Corp 409 E. Gaines Str Tallahassee, FL 3	orations reet

Articles of Amendment to Articles of Incorporation

FILED

06 JUN-2 PH 2:06

SECRETARY OF CO

MERCY MEDICAL STAFFING, INC.

NEW CORPORATE NAME (if changing):

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

į	
P05000153678	
(Document number of corporation (if known)	
he provisions of section 607 1006. Florida Statutes, this Florida Profit Corne	rat

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

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) ARTICLE V: DELETED OLUWAFEMI KOMOLAFE, DIRECTOR ADETUTU KOMOLAFE, DIRECTOR 19001 FISHERMANS BEND DRIVE: LUTZ. FL 33558 ARTICLE V: ADDED OMOLOLA KOMOLAFE, DIRECTOR 19001 FISHERMANS BEND DRIVE LUTZ, FL 33558 (Attach additional pages if necessary) If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A (continued)

The date of each amendment(s) adoption: MAY 31, 2006
Effective date if applicable: MAY 31, 2006 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved 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 cast 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.
Signed this 31 day of MAY , 2006.
Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
OMOLOLA KOMOLAFE
(Typed or printed name of person signing)
DIRECTOR
(Title of person signing)

FILING FEE: \$35