Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 205-0380

From:

: MICHAEL I. SANTUCCI, P.A. Account Name

Account Number : I20030000003 Phone

: (954)351-7474

Fax Number

: (954)351-7475

COR AMND/RESTATE/CORRECT OR O/D RESIGN

COMPREHENSIVE STAFFING AGENCY, INC.

Certificate of Status	1
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Page Count	04
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5/10/2007

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Comprehe	nsive Staffing Agency, Inc.	- 44
DOCUMENT NUM	BER: P06000067636		
The enclosed Articles	s of Amendment and fee a	re submitted for filing.	
Please return all corre	espondence concerning thi	s matter to the following:	
		V. Priore, Esq.	
	(Name	of Contact Person)	•
	SILVERMA	N SANTUCCI, LLP	
	(Fir	rm/ Company)	
	500 West Cypres	ss Creek Ŕoad, Suite 500	
		(Address)	
	Fort Laude	rdale, FL 33309	
		tate and Zip Code)	
For further information	on concerning this matter,	please call:	
Joseph V. Priore,		at (954) 351-747	
(Name o	f Contact Person)	(Area Code & Daytime Te	lephone Number)
Enclosed is a check f	or the following amount:		
☐ \$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 Add Amendment S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	e

Articles of Amendment	
to	700
Articles of Incorporation	SEC 17
of	MAY CREI LAH
Comprehensive Staffing Agency, Inc.	TAR HASS
(Name of corporation as currently filed with the Florida Dept. of State)	SERY
	# 2 =
D0000007000	1 9: FLOI
P06000067636	- 98 3
(Document number of corporation (if known)	<u>5</u> M 5
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corp	poration
adopts the following amendment(s) to its Articles of Incorporation:	
NEW CORPORATE NAME (if changing):	
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," o	r "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbrevia	tion "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article	
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	A SUCH A SECTION
Article II: The principal place of business address:	
6750 Taft Street, Hollywood, FL 33024	<u>- 5713</u>) (83:53)
Article III: The mailing address of the corporation is:	e de la companya de
Article III: The mailing address of the corporation is:	<u> </u>
6750 Taft Street, Hollywood, FL 33024	1739 Fail 3
The state of the s	
Article V: The Florida street address of the registered agent is:	
6750 Taft Street, Hollywood, FL 33024	
0700 Talt Offeet, Hollywood, TE 03024	
(Attach additional pages if necessary)	
(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	e, indicate N/A)
	
(continued)	

The date of each amendment(s) adoption: <u>5/9/2007</u>
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) v the amendment(s) by	vas/were approved by the shareholders. The number of votes cast for the shareholders was/were sufficient for approval.
The amendment(s) v following statement separately on the an	vas/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote nendment(s):
"The number of	votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
The amendment(s) v and shareholder acti	vas/were adopted by the board of directors without shareholder actio on was not required.
The amendment(s) v shareholder action w	vas/were adopted by the incorporators without shareholder action an vas not required.
Signature	LAN MARIE MA
selecto	irector, president or other officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other court tred fiduciary by that fiduciary)
	Zvi A. Itzchaki
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

FILING FEE: \$35