

PO7000028220

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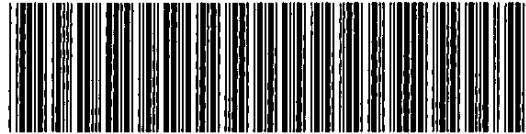
(Business Entity Name)

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DIVISION OF CORPORATIONS
2007 SEP 18 PM 12:48

PS 9/24/07
Amend/nc

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Nurse Staffing Unlimited, Inc.

DOCUMENT NUMBER: P07000028220

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tara Rose, RN, LHRM

(Name of Contact Person)

Nurse Staffing Unlimited, Inc.

(Firm/ Company)

5499 North Federal Highway, Suite F

(Address)

Boca Raton, Florida 33487

(City/ State and Zip Code)

For further information concerning this matter, please call:

Tara Rose, RN, LHRM

(Name of Contact Person)

at (561) 988-4000

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2007 SEP 18 PM 12:48

Nurse Staffing Unlimited, Inc.

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

P07000028220

(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:

NEW CORPORATE NAME (if changing):

NSU Holdings, Incorporated

(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 II - Principal Address (deleted) 23381 Water Circle, Boca Raton, FL 33486

Article II - Mailing Address (deleted) 23381 Water Circle, Boca Raton, FL 33486

Article II - Principal Address (added) 5499 North Federal Hwy, Suite F, Boca Raton, FL 33487

Article II - Mailing Address (added) 5499 North Federal Hwy, Suite F, Boca Raton, FL 33487

Article V - Management - (add) Barry Sobel, Chief Financial Officer, 8290 Nadmar Avenue, Boca Raton, FL 33434

Article V - Management - (delete) Mary Rivera - Chief Operating Officer, 1271 76th Avenue, Plantation, FL 33322

Article V - Management - (delete) John Kris - Chief Financial Officer, 23381 Water Circle, Boca Raton, FL 33486

(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)

Tara Rose - 75% of Shares

Barry Sobel - 25% of Shares

(continued)

The date of each amendment(s) adoption: September 1, 2007

Effective date if applicable: September 1, 2007
(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.

Signature Tara Rose
(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)

Tara Rose, RN, LHRM
(Typed or printed name of person signing)

Chief Executive Officer/Managing Member
(Title of person signing)

FILING FEE: \$35