# P08000000551

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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| HORNE                                   |
| J. HORNE<br>APR 1 3 2023                |
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Office Use Only



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## **COVER LETTER**

Division of Corporations Skye Recruitment Solutions, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Contact Person For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & Certificate of Status **□\$43.75** Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

### Mailing Address:

TO: Amendment Section

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

### Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

is enclosed)

# Articles of Amendment to Articles of Incorporation of

SKYE RECRUITMENT SOLUTIONS, INC.

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

|  | n as currently filed with the Florida Dept. of State)   |
|--|---|
| P08000000551   |   |
| (Documer   | ent Number of Corporation (if known)  |
| cursuant to the provisions of section 607.1006. Florida S as Articles of Incorporation:                    | Statutes, this Florida Profit Corporation adopts the following amendment(   |
| A. If amending name, enter the new name of the corp  | rporation:  |
|  | The new   |
|  | rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P.A." |
| B. Enter new principal office address, if applicable:  |   |
| Principal office address <u>MUST BE A STREET ADDR</u>  | RESS )  |
|  | <del></del>   |
|  |   |
| Enter new mailing address, if applicable:  |   |
| (Mailing address MAY BE A POST OFFICE BOX)   | <u> </u>  |
|  |   |
|  |   |
|  | <del></del>   |
| . If amending the registered agent and/or registered   | ed office address in Florida, enter the name of the   |
| new registered agent and/or the new registered off   |   |
| Name of New Registered Agent   |   |
| Name of their negimered rigem  |   |
|  |   |
| <del></del>  |   |
|  | (Florida street address)  |
| New Registered Office Address:   |   |
| New Registered Office Address:   |   |
| New Registered Office Address:   |   |
|  | , Florida<br>(City)   |
| ew Registered Agent's Signature, if changing Regist  | , Florida   |
| ew Registered Agent's Signature, if changing Regist  | , Florida<br>(City)   |
| ew Registered Agent's Signature, if changing Regist  | , Florida   |
| ew Registered Agent's Signature, if changing Regist  | , Florida   |
| ew Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I a | , Florida   |

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)

Example:

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

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

| X Change                      | <u>PT</u>    | John Doe        |                      |  |  |  |
|-------------------------------|--------------|-----------------|----------------------|--|--|--|
| X Remove                      | <u>v</u>     | Mike Jones      |                      |  |  |  |
| X Add                         | <u>sv</u>    | Sally Smith     |                      |  |  |  |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>     | <u>Addres</u> s      |  |  |  |
| 1) Change                     | DPS          | Brian W. Fowler | 905 Harbor Hill dr   |  |  |  |
| Add                           |              |                 | CLEADWATER EL 22745  |  |  |  |
| X Remove                      |              |                 | CLEARWATER, FL 33765 |  |  |  |
| 2) Change                     |              |                 |                      |  |  |  |
| Add                           |              |                 |                      |  |  |  |
| Remove 3 ) Change             |              |                 |                      |  |  |  |
| Add                           |              |                 |                      |  |  |  |
| Remove                        |              |                 |                      |  |  |  |
| 4) Change                     |              | _               |                      |  |  |  |
| Add                           |              |                 |                      |  |  |  |
| Remove                        |              |                 |                      |  |  |  |
| 5) Change                     |              |                 |                      |  |  |  |
| Add                           |              |                 |                      |  |  |  |
| Remove                        |              |                 |                      |  |  |  |
| 6) Change                     |              |                 |                      |  |  |  |
| Add                           |              |                 |                      |  |  |  |
| Remove                        |              |                 |                      |  |  |  |

|                | :h <i>additional shee</i>               | ets, if necessary). | (Be specific)          |                             |                     |  |
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|                | amendment are                           | vides for an exch   | ange, reclassification | n, or canc <u>e</u> llation | of issued shares,   |  |
| . <u>If an</u> | marchonicat pro                         |                     |                        |                             |                     |  |
| pro            | visions for imple                       | menting the amer    | idment if not conta    | ined in the amend           | <u>ment itself:</u> |  |
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| The date of each amendment(s) ad-  | option:  | , if other than the               |
|--|--|-----------------------------------|
| date this document was signed.   |  |                                   |
|  | mber 13, 2022  |                                   |
| Effective date <u>if applicable</u> :  | (no more than 90 days after amendment file date)   |                                   |
|  | (по тоге так чо авух арег атенатен не авге)  |                                   |
| Note: If the date inserted in this blo<br>document's effective date on the Dep | ock does not meet the applicable statutory filing requirements, the sartment of State's records  | ns date will not be listed as the |
| Adoption of Amendment(s)   | (CHECK ONE)  |                                   |
| ■ The amendment(s) was/were adoptaction was not required                       | nted by the incorporators, or board of directors without shareholde  | r action and shareholder          |
| ☐ The amendment(s) was/were adop<br>by the shareholders was/were suf           | nted by the shareholders. The number of votes east for the amendaticient for approval.   | nent(s)                           |
| • •  | roved by the shateholders through voting groups. The following streach voting group entitled to vote separately on the amendment(s).   |                                   |
|  | or the amendment(s) was/were sufficient for approval   |                                   |
| py.  | (voting group)   |                                   |
| Dated  |  |                                   |
| selected   | rector, president or other officer - if directors or officers have not b<br>, by an incorporator - if in the hands of a receiver, trustee, or other<br>ad fiduciary by that fiduciary) |                                   |
| !  | Brian W. Fowler  |                                   |
| -  | (Typed or printed name of person signing)  |                                   |
| I  | PRESIDENT  |                                   |
| <del>-</del>   | (Title of person signing)  | <del></del>                       |