## P090000383M

| uestor's Name)    |   |  |
|-------------------|---|--|
| ress)             | <del> </del>  |  |
| ress)             |   |  |
| State/Zip/Phon    | e #)  |  |
| ☐ WAIT            | MAIL  |  |
| ness Entity Na    | me)   |  |
| (Document Number) |   |  |
| Certificates      | s of Status   |  |
| ling Officer:     |   |  |
|                   |   |  |
| ·                 | !   |  |
|                   |   |  |
|                   | ress)  State/Zip/Phon  WAIT  ness Entity Nai  ument Number) |  |

Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

1 (and 8/11

## **COVER LETTER**

**TO:** Amendment'Section Division of Corporations

| NAME OF COR              | PORATION:                                  | Karl Industries, Inc.                                     |
|--------------------------|--|---|
|                          |  | P09700038377  |
| DOCUMENT NU              | JMBER:                                     | 000153959160  |
| The enclosed Artic       | cles of Amendment and fee a                | re submitted for filing.                                  |
| Please return all co     | orrespondence concerning thi               | is matter to the following:                               |
|                          |  | Jack A. Siebers   |
|                          | N  | lame of Contact Person                                    |
|                          | Foster, S                                  | Swift, Collins & Smith PC                                 |
|                          |  | Firm/ Company   |
|                          | 151 C                                      | Central Ave., Suite 260                                   |
|                          |  | Address   |
|                          | ŀ  | Holland, MI 49423   |
|                          | C  | ity/ State and Zip Code                                   |
|                          | jsiebers<br>E-mail address: (to be use     | @fosterswift.com d for future annual report notification) |
| For further inform       | ation concerning this matter,              | please call:  |
|                          | Jack A. Siebers                            | at ( 616 ) 796-2501                                       |
| Name                     | e of Contact Person                        | Area Code & Daytime Telephone Number                      |
| Enclosed is a chec       | k for the following amount n               | nade payable to the Florida Department of State:          |
| □ \$35 Filing Fee        | \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee &                                    |
| Mailing A Amendme        |  | Street Address Amendment Section                          |
| Division of Corporations |  | Division of Corporations                                  |
| P.O. Box 6327            |  | Clifton Building  |
| Tallahassee, FL 32314    |  | 2661 Executive Center Circle                              |
|                          |  | Tallahassee, FL 32301                                     |

## **Articles of Amendment** to Articles of Incorporation of

| Karl Industries, In   | IC.   |                        |
|---|---|------------------------|
| (Name of Corporation as currently filed with  |   |                        |
|   | P090000383  | 377                    |
| (Document Number of Corporat  | tion (if known)   |                        |
| Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:  | tes, this Florida Profit Corporation adopt  | s the following        |
| A. If amending name, enter the new name of the corporatio   | on:   |                        |
| Genoa Employment Soluti   | ions, Inc.  | The new                |
| name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional association of the word "corp." | poration," "company," or "incorporated<br>Corp," "Inc," or "Co". A professional cor | " or the               |
| B. Enter new principal office address, if applicable:   | 1931 NW 150 Ave.  |                        |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   | Sute 102  |                        |
|   | Pembroke Pines, FL 33028  |                        |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   |   | SECRETA<br>DIVISION OF |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade  |   | B PHIL: 5:             |
| Name of New Registered Agent:   |   | <b>0</b> 1 76          |
| New Registered Office Address: (Flori   | ida street address)   |                        |
|   | , Florida_  |                        |
| (City)  | (Zip Code)  |                        |
| New Registered Agent's Signature, if changing Registered A  | gent:   |                        |
| I hereby accept the appointment as registered agent. I am fami  | iliar with and accept the obligations of the p                                      | osition.               |
| Signature of New  | Registered Agent, if changing   |                        |
|   |   |                        |

## 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)

| <u>Title</u> | <u>Name</u>   | Address   | Type of Action                             |
|--------------|---|---|--|
|              |   |   | □ Remove                                   |
|              |   |   |  |
|              |   |   | Add Remove                                 |
|              | nding or adding additional Articles, endditional sheets, if necessary). (Be s                       |   |  |
|              |   |   | -  |
|              |   |   |  |
| ·            | · · · · · · · · · · · · · · · · · · ·   |   | 1  |
| provisi      | mendment provides for an exchange, ions for implementing the amendmen not applicable, indicate N/A) | reclassification, or cancella<br>t if not contained in the am | ition of issued shares,<br>endment itself: |
|              |   |   |  |
|              |   |   | ·  |
|              |   |   |  |
|              |   | 0.80000   |  |

| The date of each amendmen                         | t(s) adoption: December 3, 2011  |
|---|--|
|   | (date of adoption is required)   |
| Effective date if applicable:                     |  |
|   | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                          | (CHECK ONE)  |
| The amendment(s) was/we by the shareholders was/w | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.  |
|   | are approved by the shareholders through voting groups. The following statement and 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/we action was not required.  | re adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required.  | re adopted by the incorporators without shareholder action and shareholder   |
| Dated_Dec   | ember 3, 2011  |
| Signature   | Walk R Kul   |
| (Ву   | a director, president or other officer - if directors or officers have not been  |
|   | eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)                                      |
|   | Walter R. Ruf  |
|   | (Typed or printed name of person signing)  |
|   | President  |
|   | (Title of person signing)  |
|   | • • •  |