## P100000 40097

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	ـــــــــــــــــــــــــــــــــــــ
NAME OF CORPORATION: Concept Staffing Serves, I DOCUMENT NUMBER: 120000 40007 P1000004009	<i>3</i>
The enclosed Articles of Amendment and fee are submitted for fiting.	
Please return all correspondence concerning this matter to the following:	
Bevery P. FACAN  Name of Contact Person	
Firm/Company  Concept Stathing Semoes, Inc  Address  9800 W Bay Harby Dr. apt 7  City/State and Zip Code	D
9800 W Bay Harby Dr. apt 1	1
Bay Havby Island, FL 33154	
E-mail address: (to be used for future annual report notification)  DEVENY FAGAME 9 M, and . CM	
For further information concerning this matter, please call:	
Beverly P. Fagan , 954, 601-6706	
Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee	
Mailing Address Amendment Section Street Address Amendment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

Articles of Incorporation
of
Concert Stathing Somes Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
P10000040097
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  Quit # 112  Day Havlow Island PL 3315
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Dane Pl 33355
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florida sirvet address)
New Registered Office Address:, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent—I am familiar with and accept the obligations of the position.

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)

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.

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Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change		
Add Remove V	P. Beverly P. Fagar	9800 W Bay Havbor Dr.  ayut # 112  Bay Harbor Island Pl 331
2) Change		Bay Harbor Island M 331
Add		
Remove		
3 ) Change		
Add		
Remove		
4) Change		
Add		
Remove		
51 Change		
Add		
Remove		
6) Change		
Add		
Remove		

Attach whitimed of	ng additional Articles, enter change(s) here: vets, if necessary). (Be specific)
Auacu aaantonai si	ets, if necessary). (the specific)
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-	
f an amendment p	ovides for an exchange, reclassification, or cancellation of issued shares,
provisions for imp	ementing the amendment if not contained in the amendment itself:
(if not applicat	e, indicate NA)
<del></del>	<del></del>
<del></del> -	<del></del>
<del></del>	·

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The date of each amendment(s) adoption: Aug. 12, 2019
date this document was signed.
Effective date if applicable: Aug. 12, 2019
Effective date if applicable: \( \frac{1}{2}  \lambda  \lambda
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) ( <u>CHECK ONE</u> )
The amendment(s) was/were adopted 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 east 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.
Dated Aug. 12, 2019
Signature tays
(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)
DAMANIR. FLAGAN
(Typed or printed name of person signing)
President
(Title of person signing)