P10000053527

(Re	equestor's Name)	
(Ad	idress)	· · · · · · · · · · · · · · · · · · ·
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section, Division of Corporations

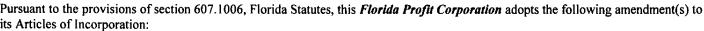
Tallahassee, FL 32314

NAME OF CORPOR	ATION: H.R. WORI	KFORCE INC	
DOCUMENT NUMB	_{ER:} P1000005352	7	
	f Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
_	R	ICARDO CAICE	EDO
_		Name of Contact Person	1
	H.F	R. WORKFORCE	EINC
_		Firm/ Company	
	143	34 RIDGE STRE	EET
-		Address	
	KIS	SSIMMEE FL 34	744
_	-	City/ State and Zip Code	e
	rotov	conviceOE@veh	no com
		service05@yaho	
	D man address. (to be at	ou for fatare annual report	notification
For further information	concerning this matter, pleas	se call:	
Ricardo Caice	edo	at (407	932-0040
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$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)
	ng Address		Address
	idment Section		Iment Section
Division of Corporations P.O. Box 6327			on of Corporations Building
			_

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

H.R. WORKFORCE INC



•	Articles of Am	endment	
	to		
	Articles of Inco	rporation	THINK HE
H.R. WORKF			To an
		*** D. 4 (C(4)	SEP 20 AM 9: 36
(Name of Corporation as curre		orida Dept. of State)	3f.00388 "11 9:36"
P1000005352			
(Document Num	ber of Corporation (if	known)	The state of the s
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this F	lorida Profit Corporation a	dopts the following amendment
A. If amending name, enter the new name of	the corporation:		
	•		W.
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "C	o". A professional corpor	The new orated" or the abbreviation ation name must contain the
B. Enter new principal office address, if appl	licable	1434 RIDGE S	TREET
Principal office address MUST BE A STREE		KISSIMMEE FL	. 34744
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		1434 RIDGE S	TREET
		KISSIMMEE FL	. 34744
D. If amending the registered agent and/or re	egistered office addre	ss in Florida, enter the na	me of the
new registered agent and/or the new regis	tered office address:		
Name of New Registered Agent			_
	(Florida stree	et address)	-
	•	,	
New Registered Office Address:	(City)	, Florida	(Zip Code)
	(3.5)		(24)
			,
New Registered Agent's Signature, if changin	g Registered Agent:		
hereby accept the appointment as registered a	gent. I am familiar w	ith and accept the obligation	ns of the position.
Signature	e of New Registered As	gent, 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.

Example: X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Р	HUMBERTO ZAMORA	113 ASTOR COURT
Add			KISSIMMEE, FL 34743
X Remove			
2) Change	Р	DAVID CARVAJAL	3074 RODRICK CIRCLE
X Add			ORLANDO, FL 32824
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			, ,
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
			
		· · · · · · · · · · · · · · · · · · ·	
			
			
			<u></u>
·		4 	<u> </u>
 			
provisions	ment provides for an exe for implementing the am applicable, indicate N/A)	schange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:	

The date of each amendment(s) adoption: 09/11/2012		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 09/11/	2012	
Signature	rector, president or other officers if directors or officers have not been	
selecte	l, by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	RICARDO CAICEDO	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	