P10000064579

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Global Employment Solutions PEO X		XV Inc.			
DOCUMENT NU	MENT NUMBER: P10000064579			<u> </u>	
The enclosed Artic	cles of Amendmen	and fee are s	ubmitted for filing.		
Please return all co	orrespondence con	cerning this m	atter to the following:		
			irlene Lemke		
		Name	of Contact Person		
•			oAdvantage		
		F	irm/ Company		
		111 W J	efferson, Suite 100		
			Address		
			o, Florida 32801		
		City/!	State and Zip Code		
	E-mail addres	dlemke@co	advantage.com future annual report notification	on)	
For further inform	ation concerning tl	his matter, ple	ase call:		
[Darlene Lemke		_ at (407)	447-	1895
Name of Contact Person		Area Code & Daytime	e Telepho	ne Number	
Enclosed is a chec	k for the following	g amount made	payable to the Florida De	partme	nt of State:
\$35 Filing Fee	S43.75 Filing Certificate of		\$43.75 Filing Fee & Certified Copy (Additional copy is enclose		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section Corporations		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C		

Tallahassee, FL 32301

Articles of Amendment to



Global Employment Solutions PEO XV Inc. SECRETARY OF STATE P1000064579 (Document Number of Corporation (if known) Insulant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the followed mendment (s) to its Articles of Incorporation: CoAdvantage Resources 38, Inc.		Articles of Incorporation	n *** (An first
(Name of Corporation as currently filed with the Florida Dept. of State AHASSEE FLORIDA P10000064579 (Document Number of Corporation (if known) arsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the follow the tendment of the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the follow the tendment of the provisions of section for the designation: CoAdvantage Resources 38, Inc. The new mem must be distinguishable and contain the word "corporation," "company," or "incorporated" or the breviation "Corp.," "Inc.," or "Co." A professional corporation mem must contain the word "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS.) Enter new mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) Florida (City) (Zip Code)		of	FI DEC 20
(Document Number of Corporation (if known) resuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the followed the interpretation: If amending name, enter the new name of the corporation: CoAdvantage Resources 38, Inc. The new must be distinguishable and contain the word "corporation," "company," or "incorporated" or the breviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation me must contain the word "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS.) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: (Florida street address) Florida (City) (Zip Code)	Global Employme	nt Solutions PEO X	V Inc. SECRETARY AH /1: 33
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, Florida (City) (Zip Code)	Name of New Registered Agent:		
, Florida (City) (Zip Code)			
(City) (Zip Code)	New Registered Office Address:	(Florida street ac	ddress)
(City) (Zip Code)			Florida
	•	(City)	
	w Registered Agent's Signature, if changing ereby accept the appointment as registered a		nd 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Norma Fabrizio	3350 BUSCHWOOD PARK DR. SUITE 200 Tampa. Florida 33618	☐ Add ☑ Remove
Pres.	Miguel Maseda	111 W. Jefferson Suite 100 Orlando, Florida 32801	☑ Add ☐ Remove
			☐ Add ☐ Remove
	ng or adding additional Articles, enter of itional sheets, if necessary). (Be specificational sheets)		
provision	ndment provides for an exchange, reclassing the amendment if napplicable, indicate N/A)		

The date of each amendment(s)	
	(date of adoption is required)
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)
(7	10 more than 90 days after amenament file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
The amendment(s) was/were a must be separately provided for	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	,,,
(v.	oting group) "
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated\Z	listron
Signature	Ml Ilman
(By a c	director, president or other officer if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
_	Mark Lowrey
_	(Typed or printed name of person signing)
_	Chief Financial Officer
	(Title of person signing)