## P11000001626

(Re	equestor's Name)	)			
· (Ad	ddress)				
(Ad	ddress)				
(C	ty/State/Zip/Phor	ne #)			
PICK-UP	☐ WAIT	MAIL			
(B	usiness Entity Na	me)			
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					
		·			

Office Use Only



700239779897

09/20/12--01012--032 \*\*35.UU

它 SEP 20 AH ID: 18

10 9 51 B

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Preferred S	Staffing of Ameri	ca, Inc.		
	BER: P1100006162				
	of Amendment and fee are su				
Please return all corre	spondence concerning this ma	atter to the following:			
	Otto S. Biltres				
		Name of Contact Person	n		
		Firm/ Company			
	11928 Sheldon F	Road			
		Address			
	Tampa, Florida 3	362			
		City/ State and Zip Cod	e		
otto	@preferredstaffir	ngofamerica.con	1		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
Otto Biltres		at (813	, 926-1900		
Name of Contact Person Area Code & Daytime Telephone N			de & Daytime Telephone Number		
Enclosed is a check fo	r 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)		
Mailing Address Street Address					
	endment Section		Iment Section		
	sion of Corporations Box 6327	Division of Corporations Clifton Building			
	hassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



Florida Dent. of State)
Florida Dept. of State)
if known)
Florida Profit Corporation adopts the following amendment(s) to
•
The new
n," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
11928 Sheldon Road
Tampa, Florida 33626
44000 01 11 5
11928 Sheldon Road
Tampa, Florida 33626
ress in Florida, enter the name of the
<u> </u>
Road
eet address)
, Florida 33626
(Zip Code)
<u>:</u> with and accept the obligations of the position.
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.

Example: X Change	<u>PT John</u>	1 Doe				
X Remove	<u>V</u> <u>Mik</u>	Mike Jones				
X Add	SV Sali	y <u>Smith</u>				
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s			
1) Change	PTVS	Josephine Moreno	7853 Gunn Highway #241			
X Remove	<del></del> **		Tampa, Fl. 33626			
2) Change	PT	Otto S. Biltres	11928 Sheldon Road			
X Add			Tampa, Fl. 33626			
Remove 3) Change	VS	Constandina Biltres	11928 Sheldon Road			
X			Tampa, Fl. 33626			
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

	lditional sheets, if	necessary).	(Be specific)	(s) here:		
		• •				
		<u></u> _:				
	-			· <del></del> -		
		<u>.                                      </u>				· · · · · · · · · · · · · · · · · · ·
						· - · · · · · · · · · · · · · · · · · ·
<del></del>			·		<del></del>	
		<del> </del>				
<u></u>						
				·,		
	<del></del>		<del></del>			
	_			–		
				- <del>-</del>		
<del></del>						
		··			· · · · · · · · · · · · · · · · · · ·	
	<del></del>					
		s for an exchar	ige, reclassificat	ion, or cancellatio	on of issued shares.	
f an ame	ndment provides		ment if not cont	ained in the ame	ndment itself:	
provision	ndment provides us for implement	ing the amend	mene ii not com			
provision	ndment provides ns for implement ot applicable, indi	icate N/A)	Ment II not com			
provision	<u>ns for implement</u>	ing the amend	men ii uoj com			·
provision	<u>ns for implement</u>	icate N/A)				·
provision	<u>ns for implement</u>	ting the amend				
provision	<u>ns for implement</u>	ting the amend				
provision	<u>ns for implement</u>	ting the amend				
provision	<u>ns for implement</u>	ting the amend				
provision	<u>ns for implement</u>	ing the amend				
provision	<u>ns for implement</u>	ting the amend				
provision	<u>ns for implement</u>	ing the amend				

The date of each amendment(s) ado	otion:	17	50	12	
Effective date if applicable:					
	(no mor	e than 90 i	days after a	mendment file date)	
Adoption of Amendment(s)	( <u>CHECK ON</u>	<u>E</u> )			
☐ The amendment(s) was/were adopt by the shareholders was/were suffi		ers. The n	umber of ve	otes cast for the amendment(s)	
☐ The amendment(s) was/were appromust he separately provided for each	ved by the sharehole the voting group ent	ders throug	gh voting gi te separate	roups. The following statement ly on the amendment(s):	
"The number of votes cast for	the amendment(s)	was/were s	sufficient fo	or approval	
by	(voting group,	)		.,,	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of d	irectors w	ithout share	holder action and shareholder	
■ The amendment(s) was/were adopte action was not required.	ed by the incorporat	ors withou	ıt sharehold	er action and shareholder	
Dated 9/17/20	12	_			
Signature	M	15		<b>-</b>	
(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)					
Otto S. Biltres					
(Typed or printed name of person signing)					
President					
	(Title o	f person si	ening)		