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C. CARROTHERS



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 2, 2016

DAVID LA VOIE RESOURCE STAFFING GROUP INC 4535 BAY SPRING COURT TAMPA, FL 33611

SUBJECT: RESOURCE STAFFING GROUP INC.

Ref. Number: P11000098519

We have received your document for RESOURCE STAFFING GROUP INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

ONLY CHECK ONE BOX ON PAGE 4 OF 4

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Cathy A Carrothers Regulatory Specialist

Letter Number: 916A00016119

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: Resource Staffing | Group Inc. | |
|---------------------------------------|---|--|--|
| DOCUMENT NUMI | BER: P11000098519 | | |
| | of Amendment and fee are su | ibmitted for filing. | |
| Please return all corre | spondence concerning this ma | atter to the following: | |
| | David LaVoie | | |
| | | Name of Contact Perso | n |
| | Resource Staffing Group Inc | | |
| | | Firm/ Company | |
| | 4535 Bay Spring Court | • | |
| | | Address ' | |
| | Tampa FL 33611 | | |
| | | City/ State and Zip Cod | e |
| dlavo | ie@rsgsearch.com | | |
| | • | sed for future annual report | notification) |
| For further information David LaVoie | n concerning this matter, pleas | | 333 0882 |
| | CO | at (813 | 333-9882 |
| Name o | 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) |
| Ame Divis P.O. | iing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314 | Amend Divisio Clifton 2661 E | Address Iment Section on of Corporations Building Executive Center Circle |

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as curren | tly filed with the Florida Dept. of State) | |
|---|--|--|
| Resource Staffing Group Inc. P11000098519 | | |
| (Document Number | of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation: | s Florida Profit Corporation adopts the follow | ving amendment(s) |
| A. If amending name, enter the new name of the corporation: | | |
| name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name mu | The new abbreviation st contain the |
| B. Enter new principal office address, if applicable: | 7815 N. Dale Mabry Hwy. | |
| (Principal office address MUST BE A STREET ADDRESS) | Suite 210 | |
| | Tampa FL 33614 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 4535 Bay Spring Court | |
| | Tampa FL 33611 | |
| • | | AU A 100 A 1 |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres | lress in Florida, enter the name of the ss: | 22 #M 877.05 S 6875.FL |
| Name of New Registered Agent | | - 17/11 - 17/11 - 17/11 |
| · | | - in a |
| (Florida st | treet address) | |
| New Registered Office Address: | , Florida | - C-21 |
| | (City) (Zi | p Code) |
| New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar | <u>t:</u> with and accept the obligations of the position | |
| Signature of New 1 | 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.

| Example: X Change | <u>PT</u> <u>John</u> | n Doe | |
|-------------------------------|-----------------------|----------------|-------------------|
| X Remove | <u>V</u> . <u>Mik</u> | e Jones | |
| X Add | SV Sall | y <u>Smith</u> | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | VP | Daniel Ryu | 5811 Memorial Hwy |
| Add | | | Suite 205 |
| X Remove | | • | Tampa FL 33615 |
| 2) Change | | | · |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| | | | |
| Add Remove | | | |
| | | | |
| 4) Change | · | · <u> </u> | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | - | | |
| Remove | | | |
| | | | |
| 6) Change | <u></u> | | |
| Add | | | |
| Demove | | | |

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| provisions for implement (if not applicable, indi | for an exchange, reclassification, or cancellation of issued shares, ing the amendment if not contained in the amendment itself: cate N/A) g number of shares, however no other changes regarding exchange, reclassification, |
| provisions for implement (if not applicable, indi | ing the amendment if not contained in the amendment itself: cate N/A) |
| provisions for implement (if not applicable, indi ease see section E. Increasin | ing the amendment if not contained in the amendment itself: cate N/A) |
| provisions for implement (if not applicable, indi ease see section E. Increasin | ing the amendment if not contained in the amendment itself: cate N/A) |
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| provisions for implement (if not applicable, indi ease see section E. Increasin | ing the amendment if not contained in the amendment itself: cate N/A) |

| The date of each amendment(s) adoption: July 19, 2016 date this document was signed. | , if other than the |
|--|----------------------|
| Effective date if applicable: 19, 2016 (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will redocument's effective date on the Department of State's records. | not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ 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 cast 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 July 19, 2016 | |
| (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) | - |
| DAVID P LAVOIE | |
| (Typed or printed name of person signing) | |
| CEO | |
| (Title of person signing) | |