P11000106901

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SECONDAY OF STATE TALLAHASSEE. FLORID

134/14

COVER LETTER

TO: Amendment Section

| Division of Corpo | rations | | | |
|--------------------------------|--|--|--|---|
| NAME OF CORPOR | ATION: Diversified E | Employee Manage | ement, Inc. | |
| DOCUMENT NUMB | D44000400 | | | |
| The enclosed <i>Articles a</i> | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corres | ondence concerning this ma | tter to the following: | | |
| | Stephanie Vela | asquez | | |
| - | • | Name of Contact Person | n | |
| - ! | 5709 Johns Ro | Firm/ Company Dad, Suite 120 |)2 | |
| • | Tampa, FL 336 | | | |
| - | | City/ State and Zip Cod | e | |
| Sve | elasquez@emp | oloymentpartn | ersinc.com | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further information | concerning this matter, pleas | se call: | | |
| Stephanie \ | /elasquez | at (813 | 374-0337 de & Daytime Telephone Number | |
| Name o | f 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) | |
| Amei Divis | ing Address indment Section ion of Corporations Box 6327 | Ameno Divisio | Address Iment Section on of Corporations Building | |

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

Diversified Employee Management, Inc.

2014 JAN 17 PM 2:45

(Name of Corporation as currently filed with the Florida Dept. of State) RETART OF STATE P11000106901

TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

| | he word "corporation," "company," or "inco "Corp." "Inc." or "Co". A professional corp | |
|---|---|-------------|
| Enter new principal office address, if apprincipal office address <u>MUST BE A STREE</u> | | |
| Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) | | |
| | · | |
| new registered agent and/or the new reg | | name of the |
| If amending the registered agent and/or renew registered agent and/or the new registered agent NA | istered office address: | name of the |
| new registered agent and/or the new reg | istered office address: | name of the |
| Name of New Registered Agent NA | (Florida street address) | ida_ |
| new registered agent and/or the new reg | istered office address: (Florida street address) | |

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> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | NA | NA | NA |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Arti (Attach additional sheets, if necessary). | (Be specific) | |
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| If an amendment provides for an exch | ange, reclassification, or cancellation of issued shares, | |
| (if not applicable, indicate N/A) | ndment if not contained in the amendment itself: | |
| A | | |
| A | | |
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| The date of each amendment(s) adoption | on: | , if other than the |
|---|---|---------------------|
| date this document was signed. | | |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were adopted by the shareholders was/were sufficie | by the shareholders. The number of votes cast for the amendment(s) nt for approval. | |
| | d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s): | |
| "The number of votes east for th | ne amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/were adopted action was not required. | by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were adopted action was not required. | by the incorporators without shareholder action and shareholder | |
| Dated | 1-8-2014 Oly - | |
| Signature | Olely w | |
| (By a director selected, by | or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court ductary by that fiduciary) | |
| Orl | y Macias | |
| _ | (Typed or printed name of person signing) | |
| Pre | sident | |
| | (Title of person signing) | |