P12000030723

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	dress)	
(Ci	ty/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Preferred Payroll Consultants Corporation <u> 212 0000 30723</u> DOCUMENT NUMBER: _ † The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Otto Biltres
Name of Contact Person Firm/ Company 11928 Sheldon Road

Address

Tampa, FL. 33626

City/ State and Zip Code Oth & Preferred Staffins of america. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (8/3) 926-/900 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy

Mailing Address

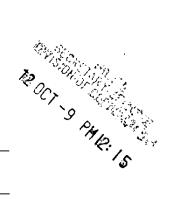
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment to Articles of Incorporation



Preferred Payroll Consultants Corporation (Name of Corporation as currently filed with the Florida Dept. of State)
(Name of Corporation as currently filed with the Florida Dept. of State)
P12000030723
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
(Matting dualess MAT BE A TOST OTTICE BOA)
D. 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 Dina Mougros 11928 Sheldon Road (Florida street address)
11928 Sheldon Road
(Florida street address)
New Registered Office Address: Tampa, Florida 33626 (City) (Zip Code)
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and 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)

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 <math>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.

X Change	<u>PT</u> <u>Johr</u>	<u>1 Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PT	Otto Biltres	11928 Sheldon Road
Add			Tamps, FL 33626
Remove			
2) Change	<u>VS</u>	Constan Lina Biltres	11928 Sheldon Road
Add			Tampa, FL. 33626
Remove	77	7. 01	
3) Change	4,1	Dina Mongros	11928 Sheldon Road
X Add			Tampa, FL. 33626
Remove			
4) Change	<u> </u>	Dina Mougros	11928 Sheldon Road
X Add			Tampa, FL. 33626
Remove			
5) Change			
Add			
Remove	•		
6) Change			
Add			
Remove			

tach additional sheets, if necessa	ıry). (Be specif	îc)		
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an amendment provides for an	exchange, recla	ssification, or ca	ncellation of issued	shares,
rovisions for implementing the (if not applicable, indicate N/.	<u>amendment it n</u> A)	ot contained in t	ne amendment itse	<u>ii:</u>
(y + FF	,			
		•		

ID /5/17
The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
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)
(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
Signature Dim Margin
(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)
(Typed or printed name of person signing)
(Typed or printed name of person signing)
President
(Title of person signing)