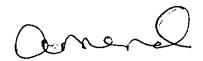
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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	☐ MAIL
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7/30/13

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SSI RECRUITERS INC
DOCUMENT NUMBER: 7 13000014566
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pamian Covos
Name of Contact Person SSI RECENTERS INC
Firm/ Company
12001 W OKEECHOBEE RD Address
HIALEAH GARDENS FL 33018
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DAMIAN COUCO a1 (786) 298 6462
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status (Additional copy is conclosed) Certificate of Status Certificate Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment

Articles of 1	(neorporation
601 P-1.	of FILED
(Name of Corporation as currently filed with the	ters Inc. e Florida Dept. of State) 2013 JUL 29 PM 4: 22
	SECREDARY OF STATE TALLAHASSEE, FLORIDA
(Document Number of Corporation	TALLAHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	" "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	12531 W OVEECHOBEE RD
(Principal office address <u>MUST BE A STREET ADDRESS</u>) .	HIAZEAH GARDENS FZ 38018
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12581 W OKECHOBEE AD HIALEAH GAADENS FL 33018
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office addr	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	. Florida
(Ci	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familio	ent: ur with and accept the obligations of the position.
Signature of New Registere	d 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>	John Doc	
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) <u>×</u> Change	D	MANUEL M COROINO	12531 W OKEECHOBEE RD
Add			HIALEAH GARDENS FZ
Remove			33018
2) 🗶 Change	D	DAMIAN COVOS	12881 W OLEECHOBEE AD
Add			HIALEAH GAADENS FZ
Remove			38018
3) Change			
Add			
Remove		•	
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>If amending or adding additional Artic</u> Attach <i>additional sheets, if necessary</i>).	cies, enter change(s) he (Be specific)	<u>re</u> :		
			 	·
		···		
		 -		
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, ndment if not contained	or cancellation of I in the amendme	issued shares, nt itself:	
,,,,				
		<u></u>		
		- ' -		

The date of each amendment(s) adoption:	, if other than the
(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	
by	
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 67 20 2013	
Signature	
(By a director, p) stdent 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)	
DAMIAN COUCS	
(Typed or printed name of person signing)	
NOCATAR	

(Title of person signing)