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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: WORKFORCE R	ESOURCES OF MIAMI II	NC.		
DOCUMENT NUMB	P13000089298				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:	!		
	Steve Hernandez				
•		Name of Contact Person	n		
	Workforce Resources of Miami, Inc.				
		Firm/ Company			
	15301 NW 7th Ave				
•		Address			
	Miami, FL 33169				
•		City/ State and Zip Cod	e		
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Sieve(@ameritempsemployment.co	m sed for future annual report	notification)		
	E-man address. (to be d.	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Steve Hernandez		954 at (461-5402		
Name of Contact Person			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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

17 MAR -5 PM 4: 32

(Name of Corporation as currently filed with the Florida Dept. of State) WORKFORCE RESOURCES OF MIAMI INC. P13000089298 (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: A. If amending name, enter the new name of the corporation: 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) 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 (Florida street address) , Florida New Registered Office Address: 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 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 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	P	James Runyon	7 WESTWOOD CENTRE
Add			POTTSVILLE, PA 17901
X Remove			
2) Change	PST	Steve Hernandez	15301 NW 7TH AVE
X Add			MIAMI, FL 33169
Remove			
3) Change			
Add			
Remove			
(Change)			
4) Change			
Add Remove			
Kemove			
5) Change		-	
Add			
Remove		1	
6) Change			
Add			
Damaya			

Attach addition	adding additional Articl il sheets, if necessary).	(Be specific)			
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f an amendmen provisions for	t provides for an exchain implementing the amend	<u>nge, reclassificati</u> Iment if not cont	on, or cancellation	<u>n of issued shares,</u> dment itself:	
(if not app	icable, indicate N/A)				
•					
<u> </u>		•			
					·

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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 da document's effective date on the Department of State's records.	te will 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 statemer must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voling group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	श
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 03-02-2017 Signature (By a director, president or other officer – if directors or officers have not been	
(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 cour appointed fiduciary by that fiduciary)	t
Steve Hernandez	
(Typed or printed name of person signing)	
Vice President	,
(Title of person signing)	