## P1400000535a

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SECRETARY OF STATE
AND AMASSEE. FT ORDIN

from sman

FEB 0 9 2017 D CUSHING

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Madison PEO of	Florida, Inc.		_		
DOCUMENT NUMI	BER: P14000005352			<del>-</del>		
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.				
Please return all corres	spondence concerning this ma	atter to the following:				
		Licensing Department				
Name of Contact Person						
	Firm/ Company					
439 S. Charles G. Seivers Blvd.						
Address						
Clinton, TN 37716						
City/ State and Zip Code				<del></del>		
		licensing@appund.com	- 114			
	E-mail address: (to be u	sed for future annual report	notification)	TACE	17	
For further information	n concerning this matter, pleas	se call:		LAHASI	FEB -3	
Licens	sing Dept.	at ( <sup>865</sup>	482-8196	일 연합	- PK	T
Name o	of Contact Person	Area Co	de & Daytime Telephone Nu	mber - c	PH 12: 24	3
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:	To the	24	
□ \$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)	, ~		
	ling Address		Address ment Section			

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

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

## Articles of Amendment to Articles of Incorporation of

Madison PEO of Florida, Inc.	
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
P14000005352	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation	<u>.</u>
INVO PEO of Florida, Inc.	The new
name must be distinguishable and contain the word "corpora" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," oword "chartered," "professional association," or the abbreviation	ation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	Por =
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	TARREST TO THE PROPERTY OF THE
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: ar with and accept the obligations of the position.
Signature of Nev	w 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 De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change		_		
Add				
Remove		•		
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		<del>-</del> -		
Add				
Remove		,		
5) Change				
Add		_		•
Remove				
6) Characa				
6) Change Add		_		
Add Remove				
vertione				

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
•	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	indifferent if not contained in the amendment Assert
•	

		, if other than the
date th	his document was signed.	
Effect	tive date <u>if applicable:</u> (no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will ment's effective date on the Department of State's records.	ot be listed as the
Adopt	tion of Amendment(s) (CHECK ONE)	
	e amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) the shareholders was/were sufficient for approval.	
	e amendment(s) was/were approved by the shareholders through voting groups. The following statement ust 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)	
	e amendment(s) was/were adopted by the board of directors without shareholder action and shareholder ion was not required.	
	e amendment(s) was/were adopted by the incorporators without shareholder action and shareholder ion was not required.	
	Dated 2/2/2017	
	Signature with the Co	
; ;	(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)	
(	William Arowood	
1	(Typed or printed name of person signing)	
	President	
[	(Title of person signing)	