P15000099339

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
,				

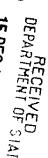
Office Use Only



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TS 0EC 15 4510: 37



DEC 1 6 2015 T SCHROEDER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 913090 4803290

AUTHORIZATION

COST LIMIT : (\$\)\122.50

ORDER DATE : December 15, 2015

ORDER TIME : 3:43 PM

ORDER NO. : 913090-025

CUSTOMER NO: 4803290

DOMESTIC AMENDMENT FILING

NAME: A-1 CONTRACT STAFFING II,

L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY

XX ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

\$ 1 · · · ·

Tallahassee, FL 32301

10:	Division of Cor					
SUBJ	FCT: Oasis Outso	urcing Contract II, Inc.				
SCDO	EC1	Name of	Resulting	Florida Profit	Corporation	
		e of Conversion, Article: Profit Corporation" in ac			ees are submitted to convert and 15, F.S.	n "Other Business
Please	return all corresp	ondence concerning this	s matter to	:		
Tiffan	y Luther					
		Contact Person	<u>-</u> -			
Oasis	Outsourcing					
		Firm/Company				
2054	Vista Parkway, Suit	e 300				
		Address				
West 1	Palm Beach, Florid	a 33411				
		City, State and Zip Code	2			
compl	iance@oasisadvant	age.com				
1	E-mail address: (t	o be used for future annu	ıal report ı	notification)		
For fu	rther information	concerning this matter,	please call	•		
Tiffan	y Luther		at (561	273-2	465	
	Name of Co	ontact Person		Area Code and	Daytime Telephone Number	
Enclo	sed is a check for	the following amount:				
5 10	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status		'5 Filing Fees ified Copy	■\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New I Divisi Clifto	ET ADDRESS: Filings Section on of Corporation n Building Executive Center			New F Divisio P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314	

Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
A-1 Contract Staffing II, L.L.C. 199-3012
Enter Name of Other Business Entity
2. The "Other Business Entity" is a limited liability company
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
May 24, 1999 on .
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
Oasis Outsourcing Contract II, Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Page 1 of 2

OF STATE	1H IO: 37
LII	ي.

Signed this day of	, 20
Required Signature for Florida Profit Corporation:	
Signature of Chairman Vice Chairman, Director, Office Incorporator: Printed Name: Raymond Heritya Title: Incorporation	er, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business E	
Signature:	Executive Vice President
Printed Name: Terry Mayotte	Title: Executive Vice President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	124 700 700 700 700 700 700 700 700 700 70
Printed Name:	Title:
If Florida General Partnership or Limited Liability I Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability I Signatures of ALL General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	

Page 2 of 2

\$35.00 \$70.00

\$8.75 (Optional) \$8.75 (Optional)

All others: Signature of an authorized person.

Certificate of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Incorporation:

Fees:

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:		
Principal street address	Mailing address,	if different is:
2054 Vista Parkway, Suite 300		
West Palm Beach, FL 33411		
ARTICLE III PURPOSE		
The purpose for which the corporation is organiz		
The nature of the business or purposes to be conducted	ed by and promoted by the Corporation is to engage	ge in any lawful act or
activity for which corporations may be organized und	ler the Florida Business Corporation Act.	
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ARTICLE IV SHARES		
ARTICLE IV SHARES		
ARTICLE IV SHARES The number of shares of stock is:	ue	
ARTICLE IV SHARES	ue	
ARTICLE IV SHARES The number of shares of stock is:	DR DIRECTORS	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/O Name and Title:	DR DIRECTORS Name and Title:	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/O	DR DIRECTORS	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/O Name and Title: Address:	OR DIRECTORS Name and Title: Address:	STORE STATE
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/O Name and Title: Address:	OR DIRECTORS Name and Title: Address:	STORE STATE
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/O Name and Title: Address:	DR DIRECTORS Name and Title: Address: Name and Title:	STORE STATE
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ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/O Name and Title: Address: Name and Title: Address:	DR DIRECTORS Name and Title: Address: Name and Title: Address:	STEEL STATE
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/O Name and Title: Address: Name and Title: Address:	Name and Title: Name and Title: Address: Name and Title: Name and Title:	STEEL STATE

ARTICL	E VI REGISTERED AGENT	,	
The name	and Florida street address (P.O. Box N	OT acceptable) of the registered agent is:	
Name:	Corporation Service Company		
Address:	1201 Hays Street		
	Tallahassee, FL 32301	_	
ARTICL			
The name	and address of the Incorporator is:		
Name:	Raymond Hedaya		
Address:	1177 6th Ave		
	New York, NY 10036		
******* Having be	**************************************	**************************************	ed in
this certifi	icate, I am familiar with and accept the a	pointment as registered agent and agree to act in this capacity	
	CAX	ourtney Williams 12/15/2015	
	Required Signature/Registered Agents	tt. Vice President Date	
		ted herein are true. I am aware that any false information submitted aird degree felony as provided for in s.817.155, F.S.	! in a
,		12/15/2015	
	Required Signature/Incorporator	Date	