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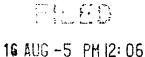
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Xtaffing, Inc				
DOCUMENT NUMB					
	of Amendment and fee are su	bmitted for fili	ng.		
Please return all corres	pondence concerning this ma	tter to the follo	wing:		
	Andreina Perez				
-		Name of C	ontact Person	n	
	Xtaffing, Inc				
•	· · · · · · · · · · · · · · · · · · ·	Firm/ (Company		
	1650 NW 128th Dr. #308	I IIIU V	Sompany		
-	··· · · · · · · · · · · · · · · · · ·	Ad	dress	· · · · · · · · · · · · · · · · · · ·	
	Sunrise, FL 33323	110	G1 C 35		
-		City/State	and Zip Cod	<u> </u>	
		City/ State	and Zip Cou	•	
andre 9	379@yahoo.com				
	E-mail address: (to be u	sed for future a	nnual report	notification)	
For further information	concerning this matter, pleas	se call:			
Andreina Perez		at (,305	910-7010	
Name o	f Contact Person	at (Area Co	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	S43.75 Fi Certified (Additional enclosed)	Copy Il copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ing Address			Address	
	ndment Section		Amendment Section		
Division of Corporations			Division of Corporations		
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



SECRETARY RESERVED Xtaffing, Inc (Name of Corporation as currently filed with the Florida Dept. of State) P16000013958 (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: 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." 1650 NW 128th Dr. Ste 308 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Sunrise, FL 33323 C. Enter new mailing address, if applicable: 1650 NW 128th Dr. Ste 308 (Mailing address MAY BE A POST OFFICE BOX) Sunrise, FL 33323 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) New Registered Office Address: Florida 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				-
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				\$14.\$1.4.\$1.4.\$2.\$1.4.\$2.\$1.4.\$1.4.\$1.4.
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
	·

The date of each amendment(s) add	07/25/16 option:	, if other than the
date this document was signed.		
07/25 Effective date <u>if applicable</u> :	/16	
<u>a apparent</u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendmen ficient for approval.	it(s)
	oved by the shareholders through voting groups. The following states ach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoptaction was not required.	ted by the board of directors without shareholder action and sharehol	lder
The amendment(s) was/were adopaction was not required.	sted by the incorporators without shareholder action and shareholder	
07/25/2016 Dated		
(By a dir	ector, president or other officer - if directors or officers have not bee	
	by an incorporator - if in the hands of a receiver, trustee, or other co	ourt
appointe	d fiduciary by that fiduciary)	
_	Hodreina Perez	
	(Typed or printed name of person signing)	
S	Secretary and Vice-President	
-	(Title of person signing)	