

(Re	questor's Name)	
(Ade	dress)	
————————(Add	dress)	
•	•	
(C:h	y/State/Zip/Phon	- 10
(Cir	y/State/Zip/Pnon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
, —	,	-,
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Cooriet Instructions to	Filling Officers	
Special Instructions to	riling Officer:	
		İ
		{

Office Use Only



600308181776

01/24/18--01015--009 **35.00

ALLAHASSEE, FLORI

JAN 25 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MS STAFFING SO	DLUTIONS, INC.		
DOCUMENT NUMB				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	nondence concerning this ma	tter to the following:		
š	MYRIANE SAMPEUR			
-		Name of Contact Person	n	
:	MS STAFFING SOLUTION	S		
-		Firm/ Company		
1	2724 GRAN BAY PKWY Y	w suite 410		
-		Address		
j	ACKSONVILLE FL 32258			
-		City/ State and Zip Cod	c	
myrian	esampeur@gmail.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Myriane Sampeur		904 at (de & Daytime Telephone Number	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
	ng Address		Address	
	idment Section	Amendment Section		
	ion of Corporations			
	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MS STAFFING SOLUTIONS, INC.

.

(Name of Corporation as current	tly filed with the Florida Dept. of State)
P17000091325	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: N/A	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A TI
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
N/A	<u></u>
Name of New Registered Agent	
(Florida st	treet address)
New Registered Office Address:	, Florida,
New Registerea Office Agaress:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent.—I am familiar	
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: <u>X</u> Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	PTD	Myriane Sampeur	 8954 Needlepoint PL
_X Add			Jacksonville Fl 32244
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date <u>if applicable</u> :	nant file date)
(no more than 20 days after amenan	an juc auto
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date 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 can by the shareholders was/were sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appro-	oval
by	"
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	on and shareholder
01/16/2018 Dated	
Signature Satton Pacharia	
(By a director, president or other officer – if directors or o selected, by an incorporator – if in the hands of a receiver appointed fiduciary by that fiduciary)	
Zacharie Sampeur	
(Typed or printed name of person signi	ng)
Director	
(Title of person signing)	