# P19000052104

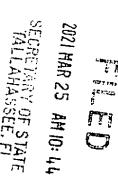
(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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	<u>COVER LETTER</u>				
TO: Amendment Section Division of Corpora					
NAME OF CORPORA	tion: Fbrida	<u>Premier Sta</u>	ffing Inc		
DOCUMENT NUMBE	R:	P 190000	50709		
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.			
Please return all correspo	ondence concerning this mat	tter to the following:			
	Ret	DLCCG WCLT			
	Florida Premier Staffing Inc				
	1 1011 100 11	Firm/ Company	July Drive		
_	PO BOX	92319			
		Address	<u> </u>		
Lakeland FL 33864  City/ State and Zip Code					
City/ State and Zip Code					
	E-mail andress: (to be us	ed for future armual report	erstafficon		
For further information concerning this matter, please call:					
Riberca L	Outer Person	at ( <u>813</u>	be & Daytime Telephone Number		
	the following amount made p				
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee



## FLORIDA DEPARTMENT OF STATE Division of Corporations

RIGHT

2021 JUH 22 AM 10: 50

May 20, 2021

REBECCA WALTON FLORIDA PREMIER STAFFING INC PO BOX 92319 LAKELAND, FL 33804 US

SUBJECT: FLORIDA PREMIER STAFFING, INC

Ref. Number: P19000052104

We have received your document for FLORIDA PREMIER STAFFING, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 821A00010806

Anissa Butler Regulatory Specialist II

www.sunbiz.org

DO DOV 0007 TO 11 1 0000

### Articles of Amendment

to

Articles of Incorpora	tion grange grant
$\mathcal{T}_{I}$ and $\mathcal{T}_{I}$	FILED
Picrida Premier State	DAG STATHER 25 ON INCLE
(Name of Corporation as currently filed	- <u> </u>
P19000052100	T SECRETARY OF STATE ration (if knowALLAHASSEE, FL
(Document Number of Corpo	ration (It knowntlaff#335E, FE
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "compan "Inc.," or Co.," or the designation "Corp," "Inc," or "Ca". A profes "chartered," "professional association," or the abbreviation "P.A."	v," or "incorporated" or the abbreviation "Corp.," sional corporation name must contain the word
B. Enter new principal office address, if applicable:	503 S US Highway 301
(Principal office address MUST BE A STREET ADDRESS)	Stufe E10
	Jampa, FL 33619
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
<del></del>	
D. If amending the registered agent and/or registered office address in l new registered agent and/or the new registered office address:	lorida, enter the name of the
Name of New Registered Agent 1503 S. US	Highwau 301
Suite F10	J
(Florida street addre	258)
New Registered Office Address: Tampa	, Florida 33(019
(City)	(Zip Code)
Nam Desiranced Assess City and City and City	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with ana	accept the obligations of the position.
	, ,
Signature of New Registere	d 4gent it changing
•	e agent, y enanging
Check if applicable  ☐ The amendment(s) is/are being tiled pursuant to s. 607.0120 (11) (e) F.S.	

سك

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:			f	odl acc	ASS.
X Change	PT John Doe	*	just Cr	cacina the	con filex
X Remove	<u>V</u> <u>Mike Jones</u>	<u> </u>	J 44(25	accing the	ر
X Add	SV Sally Smith	1	accin		
Type of Action (Check One)	Title Na	ame		<u>Addres</u> s	
1) <u>X</u> Change	D, P _			1503 S.U.S.H	
Add				Suite E10	
Remove	0			Tampa IFL	33619
2) 🗶 Change	$\frac{1}{1}$			1503 S US	Highway 301
Add	,			Suite E10	)
Remove 3) Change				Tampa, FL	33619
Add					<del></del>
Remove					
4) Change					
Add					
Remove					
5) Change					-
Add					
Remove					
б) Change			_ <del></del>		
Add					
Remove					

( ) =====	nding or adding additional Artic	eles, enter change	e(s) here:		
(Attact	additional sheets, if necessary).	(ве ѕресінс)			
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. If an a	mendment provides for an excha	ange, reclassifica	tion, or cancells	ition of issued sh	ares.
	sions for implementing the amen if not applicable, indicate N/A)				
(	f not applicable, indicate N/A)				
<del></del>					
					· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :	,	
<u>н ирупешне</u> .	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirem epartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad- action was not required.	opted by the incorporators, or board of directors without shar	cholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the aufficient for approval.	amendment(s)
must be separately provided for	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amenda	wing statement nent(s):
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
selecte	3 - 27 - 2021  irrector, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, of ted fiduciary by that fiduciary)	/c not been or other court
	Rebecca walter	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	