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PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Name	e)
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Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

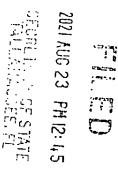
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RECENTED AUG 23 2021

U8/24/21--U1007--U22 **43.75



A. Butter 911121

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: EMPIRE STAFFIE	NG INC.			
DOCUMENT NUM	pannanagara				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Richard Granda				
		Name of Contact Person	1		
	Grand Accounting Inc.				
	 	Firm/ Company			
	16506 SAPPHIRE ST				
	Address				
	WESTON, FL 33331				
	City/ State and Zip Code				
	info@grandainc.com				
		sed for future annual report	notification)		
For further informati	on concerning this matter, plea		710-9932		
Name of Contact Person		at (at () 710-9932 de & Daytime Telephone Number		
	or the following amount made				
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

FILED

	of
EMPIRE STAFFING INC.	2021 AUG 23 PM 12: 45
(Name of Corporation a	as currently filed with the Florida Dent. of State)
P20000099032	TALLAMS SEE MATE
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Stat ts Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation $\Lambda / / \Lambda$	ration:
IV []\ name must be distinguishable and contain the word "corpor" Inc.," or Co.," or the designation "Corp." "Inc," or 'chartered," "professional association," or the abbreviation	The new ration, ""company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word ion "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES</u>	$\frac{N/A}{SS}$
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
. If amending the registered agent and/or registered onew registered agent and/or the new registered office	office address in Florida, enter the name of the
Name of New Registered Agent NA	
	(Florida street address)
l'	
New Registered Office Address: NA	, Florida

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)

_____ **Ad**d

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 Doe X Remove $\underline{\mathbf{V}}$ Mike Jones \underline{X} Add \underline{SV} Sally Smith Type of Action Title <u>Name</u> Address (Check One) Witter, Blondia Ophelia 6440 SW 22nd Street 1) ____ Change Miramar, FL 33023 ____ Add Remove AVE CHICHEN ITZA MZ 9 LOT 9 MORGAN, ANTHONY A 2) ____ Change SUPERMANZANA 38 CANCUN, QUINTANA ROO 77507 MX X _ Add Remove 3) ____ Change ____ Add __ Remove 4) ____ Change ____ Add __ Remove 5) ____ Change ____ Add ____ Remove 6) ____ Change

()	sheets, if necessary). (Be specific)
NIA	
4-1	
	
	
	
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f an amendmer	provides for an exchange, reclassification, or cancellation of issued shares,
provisions for i	aplementing the amendment if not contained in the amendment itself:
(if not appli	able, indicate N/A)
NIA	
V / (
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DocuSign Envelope ID: 25D3DC7E-4B5D-48FF-9C35-FDBD12641D1C

	August 20, 2021	
The date of each amendment(s date this document was signed.	adoption:	if other than the
Effective date <u>if applicable</u> :	ugust 20, 2021	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements. Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	idopted by the incorporators, or board of directors without sharehold	ler action and shareholder
The amendment(s) was/were by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amend sufficient for approval.	dment(s)
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment(s	statement :):
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
August 2 Dated	0, 2021	
· · · · · · · · · · · · · · · · · · ·	uthony Morgan	
selec	director, president or other officer – if directors or officers have not ted, by an incorporator – if in the hands of a receiver, trustee, or othe inted fiduciary by that fiduciary)	been er court
	Anthony Morgan	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	