## P21000055894

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: Keegu	n Employee Leasing Services, l	Inc	
DOCUMENT NUMBER	R:	1000055894		
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
		Sonia Becerra		
		Name of Contact Persor	1	
		Swyft Filings		
	<del></del>	Firm/ Company		
		3 Greenway Plaza #132	0	
	Address			
	Houston, TX 77046			
_		City/ State and Zip Cod	e	
		filings@swyftfilings.com		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information of	concerning this matter, pleas			
	nia Becerra	at (877	de & Daytime Telephone Number	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:	
\$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

## Articles of Amendment to Articles of Incorporation of

KEEGAN EMPLOYEE LEASING SERVICES, INC

	as currently filed with the Florida Dept. of State)		
	P21000055894		
(Document	Number of Corporation (if known)	* "	
rsuant to the provisions of section 607.1006, Florida Sta Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the fo	ollowing am	endment(s)
If amending name, enter the new name of the corpo	oration:		
Keegan Bu	siness Services, Inc.	The	new
me must be distinguishable and contain the word "corpo ac.," or Co.," or the designation "Corp." "Inc." or hartered," "professional association," or the abbreviat	r "Co". A professional corporation name must	reviation "C	Corp., "
man and the state of the state		्य <b>्र</b>	700
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRE	ESS)	j- <u> </u>	<del></del>
		<u> </u>	=
		28	
		. A.	· <u>-</u>
Enter new mailing address, if applicable:	:	· =	an a
(Mailing address MAY BE A POST OFFICE BOX)	·	<u>ं</u> ज	
		- 7	
If amanding the registered agent and/or registered	office address in Florida, enter the name of the		
If amending the registered agent and/or registered new registered agent and/or the new registered office			
new registered agent and/or the new registered office			
		<u></u>	
Name of New Registered Agent  Name of New Registered Agent	ce address:		
Name of New Registered Agent  Name of New Registered Agent			
Name of New Registered Agent  Name of New Registered Agent	ce address:		

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
····	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
	ndment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	Memery is not contained to the untertained liver.
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment(s) adoption:, if other than date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  (Typed or printed name of person signing)
(1 yped or printed name of person signing)
President
(Title of person signing)

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