P97000040933

| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| | | | |
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| | | | |

Office Use Only



700271313517

04/06/15--01015--013 **35.00

SECKETARY OF STATE DIVISION OF CORPORATIONS

10 (1.8,15

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: Compute BER: P97000040 | r Programing 933 | Unlimited, Inc. | |
|--------------------------|---|--|--|--|
| The enclosed Articles | of Amendment and fee are su | ibmitted for filing. | | |
| Please return all corre | spondence concerning this ma | tter to the following: | | |
| | Barbara E. Aye | ers-lachello | | |
| | | Name of Contact Person | n | |
| | Computer Prog | | | |
| | | Firm/ Company | · · · · · · · · · · · · · · · · · · · | |
| 4401 Roanoak Way | | | | |
| | | Address | | |
| | Palm Harbor, F | FL 34685 | | |
| | | City/ State and Zip Cod | e | |
| l iz | :@cpustaffing.c | om | | |
| | | sed for future annual report | notification) | |
| | E man address, (to be as | sed for ratare aimaar report | Hotrication | |
| For further information | n concerning this matter, pleas | se call: | | |
| Barbara E. | Ayers-lachello | _{at (} 727 | ,9420744 | |
| Name of Contact Person | | Area Co | 9420744 de & Daytime Telephone Number | |
| Enclosed is a check for | or the following amount made | | | |
| ■ \$35 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) | |
| Mai | iling Address | Street | Address | |
| | endment 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



| Computer Programing Ur | nlimited,Inc. | | 3/ |
|--|--|--|----------------------------|
| (Name of Corporation as current | | of State) | _ |
| P97000040933 | | | |
| (Document Number | er of Corporation (if known) | | _ |
| Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation: | orida Statutes, this <i>Florida Prof</i> | It Corporation adopts the following | ng amendment(s) to |
| A. If amending name, enter the new name of the | he corporation: | | |
| CPU Staffing, Inc. | | | The new |
| name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or | Corp," "Inc," or "Co". A pro | ny," or "incorporated" or the a fessional corporation name must | bbreviation contain the |
| B. Enter new principal office address, if applic (Principal office address MUST BE A STREET.) | | | _ |
| | | | Aven |
| | | | <u>-</u> |
| C. Enter new mailing address, if applicable: | T BAVI | | |
| (Mailing address MAY BE A POST OFFICE | <u>. BOX</u>) | | _ |
| | | | - |
| | | | - |
| D. If amending the registered agent and/or reg | gistered office address in Flori | da, enter the name of the | |
| new registered agent and/or the new register | ered office address: | | |
| Name of New Registered Agent | | <u></u> | |
| | | | |
| , | (Florida street address) | | |
| New Registered Office Address: | | , Florida | _ |
| | (City) | (Zip Code) | |
| | | | |
| New Registered Agent's Signature, if changing | Registered Agent: | | |
| I hereby accept the appointment as registered age | ent. I am familiar with and acc | ept 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 Doc | |
|----------------------------|--------------|-------------|--|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | ` | |
| Add | | | |
| Remove | | | |
| 3) Change | • | | |
| | | | |
| Add | | | <u> </u> |
| Remove | | | - |
| 4) Change | | | |
| Add | | | |
| Remove | | | Markey and the second s |
| 5) Change | | | |
| | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | (Be specific) |
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| If an amendment provides for an eych | ange reclassification or cancellation of issued shares |
| If an amendment provides for an exchaprovisions for implementing the amer | ange, reclassification, or cancellation of issued shares, |
| If an amendment provides for an exchiprovisions for implementing the amer (if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
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| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself: |
| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself: |

| The date of each amendment(s) adoption: | , if other than the |
|--|---------------------|
| date this document was signed. | |
| Effective date if applicable: | |
| (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast 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" | |
| (voting group) | |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. | |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated 04/02/2015 | |
| Signature By a director, president of 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) | |
| Barbara E. Ayers-lachello | |
| (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | |