

AUG-24-2011 WED 04:22 PM

Division of Corporations

P98000005366

P.001

Page 1 of 1

alter: Terence

Florida Department of State
Division of Corporations
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
STAFFMAX, CORP.**

Certificate of Status	0
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August 24, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

STAFFMAX, CORP.
P.O. BOX 52-6404
MIAMI, FL 33152

SUBJECT: STAFFMAX, CORP.
REF: P98000005366

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

FAX Atnd. #: H11000210597
Letter Number: 611A00019862

Articles of Amendment
to
Articles of Incorporation
of

FILED
2011 AUG 24 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STAFFMAX, CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

P98000005366

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9737 NW 41 ST
STE 319
DORAL FL 33178

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 52-6404
MIAMI, FL 33152

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

MARITZA LORCA

New Registered Office Address:

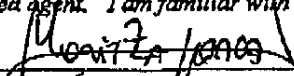
9737 NW 41 ST, STE 319

(Florida street address)

DORAL, Florida 33178
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent

I hereby accept the appointment as registered agent. I am familiar with and accept 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PO	VARGAS, EDUARDO E.	11433 NW 69 TER DORAL FL 33178	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
PO	LORCA, MARITZA	9737 NW 41 ST STE 319 DORAL FL 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here;
(attach additional sheets, if necessary). (Be specific)

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)

The date of each amendment(s) adoption: 08/22/2011
(date of adoption is required)

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 08/22/11

Signature MARITZA LORCA
(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)

MARITZA LORCA
(Typed or printed name of person signing)

PD
(Title of person signing)