Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Fax Number : (850)617-6380

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Account Name : MACFARLANE FERGUSON & MCMULLEN

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22

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COR AMND/RESTATE/CORRECT OR O/D RESIGN LFH ACQUISITION CORP.

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Corporate Filing Menu

Help OCT 2 3 2015

A RAMSEY

(CLEARWATER)

TO: Amendment Section

COVER LETTER'

Division of Corp	porations		·		
NAME OF CORPO	RATION: LFH ACQUISITIO	ON CORP.	·		
DOCUMENT NUM	BER: P98000023733				
The enclosed Articles	of Amendment and fee are su	ibmitted for filling.			
Please return all corre	espondence concerning this ma	tter to the following:			
	J. PAUL RAYMOND				
	Name of Contact Person				
	MACFARLANE FERGUSO	N & MCMULLEN			
		Firm/ Company			
	625 Court Street, Suite 200				
	Address				
	Clearwater, FL 33756				
	•	City/ State and Zip Code	c		
jpr@	macfar.com				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
J. Paul Raymond		at (⁷²⁷	. 441-8966		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	riment of State:		
□ \$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)		
Malling Address			Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, PL 32301			

FILED

Articles of Amendment Articles of Incorporation of

2015 OCT 22 AM 9: 45

Articles of incorporation	
of	SELVE THE STA
FH ACQUISITION CORP.	TALL APPASSED, FLO.
(Name of Corporation as currently filed with the F	TOLIGH DOUR OF STREET
98000023733	
(Document Number of Corporation (if ke	nown)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Con</i> s Articles of Incorporation:	rporation adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:	
OWER BIGHT STAFFING SOLUTIONS, INC.	The new
ome must be distinguishable and contain the word "corporation," "company," or Corp.," "Inc.," or "Co". A profession "Corp.," "Inc.," or "Co". A profession ord "chartered," "professional association," or the abbreviation "P.A."	or "incorporated" or the abbreviation mal corporation name must contain the
Enter now principal office address, if applicables Principal office address <u>MUST RE A STREET ADDRESS</u>)	•
	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	
(Malling address MAY BE A POST OFFICE BOX)	·
	· · · · · · · · · · · · · · · · · · ·
·	
. If amending the registered agent and/or registered office address in Florida. on new registered office address:	iter the name of the
Name of New Registered Agent	
•	
(Florida street address)	
New Registered Office Address:	, Florida
(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent:	
nereby accept the appointment as registered agent. I am familiar with and accept the	s 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 Clork; 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: XChange	PT	John De	<u>0</u> 4	
X Remove	¥	Mike Jo	शास्त्र	
_X Add	<u>87</u>	Sally St	mith .	
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				<u> </u>
Remove				
6) Change				
Add		_	1.1.100	
Add			•	

Page 3 of 4

The date of each amendment(s) a	doption:	if other than the
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 is document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we epartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) iffleient for approval.	
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement reach 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	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	(voling group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
October:	22, 2015	
Dated	1617	
Cianotura	(4, X/.)	
Signature(By a (director, president or other officer - if directors or officers have not been	
selecte	ed, by an incorporator if in the hands of a receiver, trustee, or other court	
appoir	nted fiduciary by that fiduciary)	•
•	J. PAUL RAYMOND	
	(Typed or printed name of person signing)	
	SECRETARY	
	(Title of person signing)	