1998000048904

(Requestor's Name)					
(Address)					
(Address)					
(Cit. (Ch.t. 71 (D)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Certified Copies Certificates of Status					
Consistent and Consis					
Special Instructions to Filing Officer:					
,					

Office Use Only



400065495504

02/10/06--01028--020 **1050.00

FILED

06 FEB 10 MH 9: 10

SECRETARY OF STAIL
ALLAHASSEE, FIORIL

Joseph 2-10-01

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Able Staffing - Leasing III, IWC. (Name of Corporation)					
DOCUMENT NUMBER: P98 00004 8904					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
·					
Denise Russell					
(Name of Contact Person)					
Lamont & Auchampau, P.A.					
(Firm/Company)					
P.O. Box 6026					
(Address)					
Clearwater, FL 33758					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
Denise Russell at (727) 772-7344 (Name of Contact Person) (Area Code & Daytime Telephone Number)					
Enclosed is a \$35.00 check made payable to the Department of State.					

Mailing Address

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT O	F CHANGE OF REGISTEREE FOR CORI	O OFFICE OR REGISTE PORATIONS	CRED-AGENT OR BOTH
statement of change	risions of sections 607.0502, 617.05 is submitted for a corporation orgo change its registered office or regis	mized under the laws of the	State of Florida
The name of the c The principal office	corporation: Able Staff 3040 Gulf To	Fine + Leasing Bay Blvd., Clea	rwater, FL 33759
3. The mailing addre	ess (if different): 3040 Gulf	To Bay Blvd., (Clearwater, FL 337
4. Date of incorporat	tion/qualification: 4/3/0	8 Document number:	P98000048900
5. The name and stre Florida Departmen	et address of the current registered	agent and registered office	
	30750 U.S. 19 N		
	Palm Harbor, FL	34684	06 FE SECRI
6. The name and stre (if changed):	et address of the new registered age	ent (if changed) and /or regis	m~ - 1
	David A. Lamont,	Esquire	
	3040 Gulf To Bay	Blvd.	ATE RUD
	(P.O. Box NOT acceptable) Clearwater, FL	a) 33759	
as changed will be	f its registered office and the stree denticed:		
Such change was au authorized by the bo	thorized by resolution duly adopted or the corporation has been n	ed by its board of directors otified in writing of the ch	or by an officer so ange.
1411		Christopher N	Mongelluzzi, (PSTD
/ \/ \/ \/\rac{1}{2}1	an officer or director)	• • • • • • • • • • • • • • • • • • • •	d name and title)
I hereby accepythe of I funther agree to co of my duties, and I a document is being fi corporation has bee	appointment as registered agent a mply with the provisions of all sta m familiar with and accept the ob led merely to reflect a change in t n notified in writing of this change	nd agree to act in this cape tutes relative to the proper ligation of my position as i he registered office addres. 2.	acity, and complete performance registered agent. Or, if this s, I hereby confirm that the
	\mathcal{N}	February 6. 2	.006 ·

(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

(Signature of Registered Agent)

If signing on behalf of an entity: