P05000129516

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Certified Copies	Certificates of Status
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Special Instructions to	o Filing Officer:
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>BTM</u> C	ONSTRUCTION SI	rvices Ixt,
DOCUMENT NUMBER: <u>PO5000</u>	129516	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Brian L. Name	Mi Tchell of Contact Person	
BTM construction	irm/ Company	<i>C.</i>
720 Bird Brack	h Way Jacksonville Address	P. 32159
Jacksonville 1-1	on'da 32259 State and Zip Code	
E-mail address: (to be used for	tuture annual report notification)	_
For further information concerning this matter, please of Contact Person		9113 phone Number
Enclosed is a check for the following amount made	payable to the Florida Departi	ment of State:
\$35 Filing Fee \$\times \text{\$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 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2009

BRIAN L MITCHELL 720 BIRD BRANCH WAY JACKSONVILLE, FL 32259

SUBJECT: BTM CONSTRUCTION SERVICES, INC.

Ref. Number: P05000129516

We have received your document for BTM CONSTRUCTION SERVICES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6957.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 009A00027677

Articles of Amendment Articles of Incorporation

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•	
Articles of A	mendment
to Articles of Inc.	corporation
of	ACCO COLOR
RTM consequential Est	corporation Alico Ali
(Name of Corporation as currently filed with	the Florida Dept. of State)
Parano 12 G	= 11
(Document Number of Corpora	tion (if known)
•	4
rsuant to the provisions of section 607.1006, Florida Statu endment(s) to its Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following
If amending name, enter the new name of the corporation	<u>or:</u>
BTM Services of North	Florida INC. The new
me must be distinguishable and contain the word "corp	poration," "company," or "incorporated" or the
breviation "Corp.," "Inc.," or Co.," or the designation "C	Corp," "Inc," or "Co". A professional corporation
ne must contain the word "chartered," "professional associ	
Enter new principal office address, if applicable:	720 Bird Branch Way
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	JACKSON Ville Florida
	21165
	52251
Enter new mailing address, if applicable:	0 4
(Mailing address MAY BE A POST OFFICE BOX)	SAME AS ABOVE
If amending the registered agent and/or registered office	e address in Florida, enter the name of the
new registered agent and/or the new registered office ad	
Name of New Registered Agent:	
New Registered Office Address: (Flor	rida street address)
	,
(City)	, Florida)
(City)	(Lip Code)
w Registered Agent's Signature, if changing Registered A	
ereby accept the appointment as registered agent. I am fam	iliar 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)

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rector	Tyler Mitchell	720 Bird E	Branch Add Remove
rector	Tyler Mitchell Kerly Mitchell	720 Bird Br	
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	ling or adding additional Articles, e		
(attach ad	dditional sheets, if necessary). (Be s	specific)	
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F. If an am	andment provides for an evolunge	modes of fraction on a consollar	· ·
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The date of each amendment(s) adoption: (date of adoption is required) Effective date if applicable:		
Effective da	ite <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adop* J	f Amendment(s)	(CHECK ONE)
		re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
		re approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The	e number of votes	east for the amendment(s) was/were sufficient for approval
by _		(voting group)
action w	as not required.	e adopted by the board of directors without shareholder action and shareholder
The ameraction was	ndment(s) was/wer as not required.	e adopted by the incorporators without shareholder action and shareholder
	Dated	8/5/09
	selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
		(Typed or printed name of person signing)
,		(Title of person signing)