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SECRETARY OF STATE

1 0 WH 8: 20

C.LEWIS 1-16-14

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Bigham Hide Co., Inc.				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
William G. Bizham Name of Contact Person				
Name of Contact Person	•			
Bigham Hide Co. Inc.				
Firm/ Company	•			
P.O. Box 188 Address				
Address				
Coleman, FL 33521				
Coleman, FL 33521 City/State and Zip Code	•			
E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
10/11/18 G Richam 352 31/3-1930				
William G. Bisham at 352 303-1930 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
,				
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Malling Address Street Address				
Amendment Section Amendment Section				
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				
Tallahassee, FL 32301				

APPROVED AND FILED

Articles of Amendment to Articles of Incorporation

14 JAN -9 AM 8: 50 SECRETARY OF STALE FALLARASSEE, FLORIDA

Poly Wide Com	of	TALL ATTACKED, FLORID	i,t
(Name of Corporation as curren	tiv filed with the Florida Dept. o	f State)	
	36954		
	er of Corporation (if known)	***********	
ursuant to the provisions of section 607.1006, Fi Articles of Incorporation:	lorida Statutes, this Florida Profit	Corporation adopts the following amend	iment(s
If amending name, enter the new name of t	he corporation:		
		The i	new
ord "chartered," "professional association," of Enter new principal office address, if application of the principal office address MUST BE A STREET. Enter new mailing address, if applicable:	cable:		
(Mailing address MAY BE A POST OFFICE If amending the registered agent and/or re- new registered agent and/or the new registered	gistered office address in Florida	enter the name of the	
	ered office address:		
Name of New Registered Agent	, 11		
	(Florida street address)		
New Registered Office Address:	(2)	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		et 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 <math>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	PT John De	<u>Qe</u>	
X Remove	V Mike Jo	<u>Ones</u>	
X Add	SV Sally S	mith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PSTO	William G. Bigham	P.O. Box 188
Add Add		·	Coleman, FL 3352
Remove			
2) Change	POT	Robert G. Bigham	115301 North
Add Remove			Coleman, FL >3521
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	******************	A	
Add			
Remove			

tach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
If an amendment provides for an exch. provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment 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:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, and amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, independent if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

APPROYEU AND FILED

The date of each amendment(s) adoption:	14 JAN -9 AM 8: 50		
Effective date if applicable:	SECRETARY OF STATE TALL CHASSES, FLORIDA		
(no more than 90 days after a			
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the shareholders. The number of voby the shareholders was/were sufficient for approval.	otes cast for the amendment(s)		
☐ The amendment(s) was/were approved by the shareholders through voting grant be separately provided for each voting group entitled to vote separate.			
"The number of votes cast for the amendment(s) was/were sufficient for approval			
by	.,,		
☐ 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 sharehold action was not required.	ler action and shareholder		
Dated 1-6-2014			
Signature W. Signature (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)			
William G. Bigham (Typed or printed name of person signing)			
Sec. Treas. IPres. (Title of person signing)			