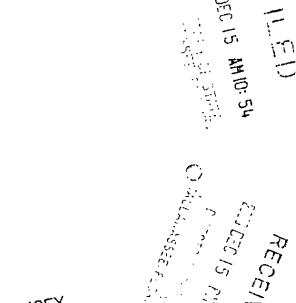
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N/C Amera



A. RAMSEY DEC -182023 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE: 213747 8104888 AUTHORIZATION : COST LIMIT : \$ 35.00 ORDER DATE: December 15, 2023 ORDER TIME : 1:41 PM ORDER NO. : 213747-015 CUSTOMER NO: 8104888 FOREIGN FILINGS NAME: SEBESTA, INC. XX CORPORATE ____ LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX AMENDMENT PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ____ CERTIFIED COPY XX PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING

EXAMINER: ____

CONTACT PERSON: Eyliena Baker -- EXT#

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

BBOEC 15 MID: Su F01000002526 (Document number of corporation (if known) Sebesta, Inc. (Name of corporation as it appears on the records of the Department of State) (Incorporated under laws of) (Date authorized to do business in Florida) SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES) 4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of 10/27/2023 incorporation? NV5 Consultants, Inc. (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 6. If the amendment changes the period of duration, indicate new period of duration. (New duration) 7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction. (New jurisdiction) 8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

9. If the amendment changes person, title or capacity in accordance with 607,1504 (4), indicate that change:

Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Add
			□Remove
			Add
		.	□Remove
			□Add
			□Add
			□Remove
Attached is a ce of the applicatio under the laws o	ertificate or document of similar import, even to the Department of State, by the Secreta of which it is incorporated.	videncing the amendment, authe ary of State or otherofficial havin	nticated not more than 90 days prior to deliver ng custody of corporate records in the jurisdictio
	(Signature of a director	or, president or other officer - if	in the hands of
Dishert	a receiver or other co	ourt appointed fiduciary, by that	fiduciary)
Richard Tong			ive Vice President
(*	Typed or printed name of person signing)	(7	Fitle of person signing)

FILING FEE \$35.00

Office of the Minnesota Secretary of State Certification of Record

I, Steve Simon, Secretary of State of Minnesota, do certify that: The filing(s) listed below were filed in the Minnesota computerized/central filing system on the date(s) listed below and that the copies associated with this certification are a true and complete copy of those filings as filed in that system.

Filing(s) filed on:

Filing Date	Filing Type	Filing Number
10/27/2023	Amendment - Business Corporation (Domestic)	1423574300038

This certificate has been issued on: 12/15/2023



Steve Simon
Secretary of State
State of Minnesota



Office of the Minnesota Secretary of State

Minnesota Business & Nonprofit Corporations Amendment to Articles of Incorporation

Minnesota Statutes, Chapter 302A or 317A

Read the instructions before completing this form.

1 File Number: 8I-929

Yes 🖳 No 🕝

Filing Fee: \$55 for expedited service in-person and online filings, \$35 for mail

Note: Information provided when filing a business entity is public data and may be viewable online. This includes but is not limited to all individual names and addresses.

. Corporate Name: (Required)	
Sebesta, Inc.	
List the name of the company prior to any desired name	
 This amendment is effective on the day it is filed wi han 30 days after filing with the Secretary of State. 	th the Secretary of State, unless you indicate another date, no late
man 50 days after filing with the Secretary of State.	10/26/2023
	Format: (mm/dd/yyyy)
 The following amendment(s) to articles regulating the amended article(s) indicating which article(s) is (are) be fit in the space provided, attach additional pages. ARTICLE 	e above corporation were adopted: (Insert full text of newly eing amended or added.) If the full text of the amendment will not
he name of the corporation is NV5 Consultan	ts, inc.
6. I, the undersigned, certify that I am signing this doc person(s) whose signature would be required who has a capacities. I further certify that I have completed all re correct and in compliance with the applicable chapter of	ument as the person whose signature is required, or as agent of the authorized me to sign this document on his/her behalf, or in both equired fields, and that the information in this document is true are
person(s) whose signature would be required who has a capacities. I further certify that I have completed all recorrect and in compliance with the applicable chapter of	ument as the person whose signature is required, or as agent of the authorized me to sign this document on his/her behalf, or in both equired fields, and that the information in this document is true are of Minnesota Statutes. I understand that by signing this document ction 609.48 as if I had signed this document under oath.
6. I, the undersigned, certify that I am signing this doc person(s) whose signature would be required who has a capacities. I further certify that I have completed all recorrect and in compliance with the applicable chapter of am subject to the penalties of perjury as set forth in Security Signature of Authorized Person or Authorized Agent Email Address for Official Notices Enter an email address to which the Secretary of State licenses@nv5.com Check here to have your email address excluded from	nument as the person whose signature is required, or as agent of the authorized me to sign this document on his/her behalf, or in both equired fields, and that the information in this document is true are of Minnesota Statutes. I understand that by signing this document ection 609.48 as if I had signed this document under oath. 10/26/2023 Date can forward official notices required by law and other notices: Tom requests for bulk data, to the extent allowed by Minnesota law.
6. I, the undersigned, certify that I am signing this doc person(s) whose signature would be required who has a capacities. I further certify that I have completed all recorrect and in compliance with the applicable chapter of am subject to the penalties of perjury as set forth in Security Signature of Authorized Person or Authorized Agent Email Address for Official Notices Enter an email address to which the Secretary of State licenses@nv5.com Check here to have your email address excluded for List a name and daytime phone number of a person	nument as the person whose signature is required, or as agent of the authorized me to sign this document on his/her behalf, or in both equired fields, and that the information in this document is true are of Minnesota Statutes. I understand that by signing this document etion 609.48 as if I had signed this document under oath. 10/26/2023 Date can forward official notices required by law and other notices: Tom requests for bulk data, to the extent allowed by Minnesota law who can be contacted about this form:
6. I, the undersigned, certify that I am signing this doc person(s) whose signature would be required who has a capacities. I further certify that I have completed all recorrect and in compliance with the applicable chapter of am subject to the penalties of perjury as set forth in Security Signature of Authorized Person or Authorized Agent Email Address for Official Notices Enter an email address to which the Secretary of State licenses@nv5.com Check here to have your email address excluded from	nument as the person whose signature is required, or as agent of the authorized me to sign this document on his/her behalf, or in both equired fields, and that the information in this document is true are of Minnesota Statutes. I understand that by signing this document ection 609.48 as if I had signed this document under oath. 10/26/2023 Date can forward official notices required by law and other notices: Tom requests for bulk data, to the extent allowed by Minnesota law.

Does this entity own, lease, or have any financial interest in agricultural land or land capable of being farmed?



Work Item 1423574300038 Original File Number 81-929

STATE OF MINNESOTA
OFFICE OF THE SECRETARY OF STATE
FILED
10/27/2023 11:59 PM

Steve Simon Secretary of State

Atere Pinn