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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone Fax Number : (954)208-0845

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-	8 PH 2 40	SECRETARY OF DIALITY OF THE PERMIT	OR AMND/RESTATE/CORRECT OR O/D RESIGN T.V. JOHN & SON, INC.		
\circ	J. NUL		Certificate of Status	0	CREE JUN
<u> </u>			Certified Copy	1	
9			Page Count	03	SEL 8
			Estimated Charge	\$43.75	
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PLEASE HONOR SUBMISSION DATE 6/15/2018

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JUN 1 9 2018

TURNEUX

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

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

SECTION 1 (1-3 MUST BE COMPLETED)

F07000000361				
(Document numb	per of corporation (if known)			
T.V John & Son, Inc.				
	rs on the records of the Department of State)			
Wisconsin	3: 01/19/2007 (Date authorized to do business in Florida)			
(Incorporated under laws of)	(Date authorized to do business in Provida)			
•	ECTION II Y THE APPLICABLE CHANGES)			
-	tion, when was the change effected under the laws of			
its jurisdiction of incorporation? 6/8/2018				
5 Symbion Construction, Inc.	suffix "corporation," "company," or "incorporated," or			
appropriate abbreviation, if not contained in new (If new name is unavailable in Florida, enter alterna business in Florida)	ite corporate name adopted for the purpose of transacting			
5. If the amendment changes the period of duration, in	ndicate new period of duration. SECRETARY New duration) poration, indicate new jurisdiction. Poration indicate new jurisdiction.			
4)	New duration)			
7. If the amendment changes the jurisdiction of incorp				
•	ew jurisdiction)			
S. Attached is a certificate or document of similar imp 90 days prior to delivery of the application to the D having custody of corporate records in the jurisdict	port, evidencing the amendment, authenticated not more than bepartment of State, by the Secretary of State or other official ion under the laws of which it is incorporated.			
563	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Signature of a director, proof a receiver or other cour	resident or other officer - if in the hands rt appointed fiduciary, by that fiduciary)			
Sonya K. Simon	Corporate Counsel			
(Typed or printed name of person signing)	(Title of person signing)			

TEMPLATE 2011

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, Mary Ann McCoshen, Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that an Amendment was filed with this department effective June 8, 2018 changing the name of T. V. JOHN & SON, INC. to the present name of SYMBIONT CONSTRUCTION, INC.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on June 8, 2018.

MARY ANN McCOSHEN, Administrator Division of Corporate and Consumer Services Department of Financial Institutions