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COVER LETTER

TO: Amendment Section
Division of Corporations

No.

NAME OF CORPOR	ATION: Lidberg Land Surve	cying, Inc.			
DOCUMENT NUMB					
	of Amendment and fee are sub	omitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	Devlin H. Dwyer, Esq.				
-		Name of Contact Persor	1		
	Brodnan Dwyer, LLC				
-		Firm/ Company			
	999 Peachtree Place, Suite 11	20			
•	Address				
	Atlanta, GA 30309				
-		City/ State and Zip Code	:		
ddwyd	er@brodnandwyer.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, please	e call:			
Devlin H. Dwyer, Esq.		at (389-9043		
Name of Contact Person at (404) 389-9043 Area Code & Daytime Telephor		de & Daytime Telephone Number			
Enclosed is a check for	the following amount made p	ayable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 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		Amend Divisio Clifton	Address ment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Lidberg Land Surveying, Inc.			
(Name of C	orporation as curre	ntly filed with the Florida Dept. of	State)
G13574			
	(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, th	nis Florida Profit Corporation adopt	ts the following amendment(s) to
A. If amending name, enter the new name	of the corporation:		
Lidberg Land Surveying Jupiter, Inc.			✓ The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," or	r "Co". A professional corporation	ed" or the abbreviation
B. Enter new principal office address, if a	R. Enter new principal office address if applicable:		
(Principal office address MUST BE A STRI			,
			<u> </u>
C. Enter new mailing address, if applicah	ole:	N/A	罗万万
(Mailing address MAY BE A POST OF)	FICE BOX)	-	
D. If amending the registered agent and/o new registered agent and/or the new re			of the
N/A			
Name of New Registered Agent			
	/El=-i.J	street address)	
N/		street address)	N/A
New Registered Office Address:		, Fl	orida N/A (Zip Code)
		(0.0)	(Elp Cont)
New Registered Agent's Signature, if chan			
I hereby accept the appointment as registered	d agent. I am familia	ar with and accept the obligations of	the position
N/A			
	Signature of Nev	w 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 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I) N/A Change	N/A	N/A	N/A
Add			
Remove			
2) N/A Change	N/A	N/A	N/A
Add			
Remove 3) N/A Change	N/A	N/A	N/A
Add			
Remove			
4) N/A Change	N/A	N/A	N/A
Add			
Remove			
5) N/A Change	N/A	N/A	N/A
Add			
Remove			
6) N/A Change	N/A	N/A	N/A
Add			
Remove			

(Attach additional sheets, if necessary).	
· ————	· · · · · · · · · · · · · · · · · · ·
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(у погаррисавіє, пайсає ічл.) N/A	
WA	
	

• •	N/A	
The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
N/A		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ock does not meet the applicable statutory filing requirements, the artment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendmicient for approval.	eent(s)
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following standard woting group entitled to vote separately on the amendment(s):	ilement
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
-	(voting group)	
action was not required. ☐ The amendment(s) was/were adop	nted by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder	
action was not required.	- /	
11/9/18 Dated		
Signature(By a dir	rector, president of other officer, if directors or officers have not be	
selected.	, by an incorporator - if in the hands of a receiver, trustee, or other ad fiduciary by that fiduciary)	court
1	David C. Lidberg	
	(Typed or printed name of person signing)	
!	President	
_	(Title of person signing)	