## L56458

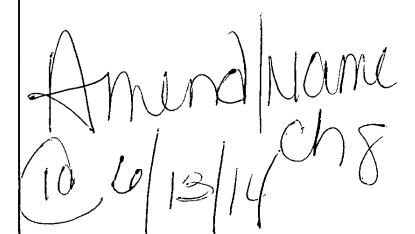
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: LEHMANN MISCH. INC.  DOCUMENT NUMBER: L56658
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
THOMAS L. VANANTUERPIII  Name of Contact Person  LEHMANN MECHANICAL Fuc.  Firm/ Company  10168 HOTH Trail S.  Address  BOYNTON BCH TOLA. 33586  City/ State and Zip Code  TOMVANANTUERPIII @ AMAN. Com
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Name of Contact Person at (561) 547-5900  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  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  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

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Articles of Am	endment ,	" Marky
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Articles of Inco	rporation	04 - 11/11
of _		ં 👉 🦼 🔗
LEHMAHN MICCHAH	ical, Luc.	0//
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	197.A
L56658		
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:		
LEHMANN MECHANICA	HRATING+ACT	Tue
name must be distinguishable and contain the word "corporation,		reviation
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "C		
word "chartered," "professional association," or the abbreviation "P		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	10168 HOW TIZZI	
		~
	BOYLTON BEHT	<sup>さ</sup> (み・
	7	2545
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9,	2 6 20
(Mutting uttaress MAT DE A FOST OFFICE BOX)		
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the	
new registered agent and/or the new registered office address:		
Name of New Registered Agent Tom VALL	<u>Antwerd</u>	
10168 HO	THE TRANS	
(Florida stree		
R	Ray 2243	2/
New Registered Office Address: 100 y 11 Ton	Florida (Zip Code)	<b>)</b> (=
• (Спуу	(Lip Code)	

Signature of New Registered Agent, if changing

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I appropriate and accept the obligations of the position.

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.

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>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			18.
Remove			
6) Change			
Add			
Remove			•

ttach <i>addition</i>	adding additional A al sheets, if necessary	). (Be specifi	(c)		
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rovisions for	ent provides for an ex implementing the au olicable, indicate N/A)	mendment if n	ssification, or c ot contained in	ancellation of iss the amendment	ued <u>shares,</u> itself:

The date of each amendment(s) adoption: 5-31-14	, if other than the
date this document was signed.	
Effective date if applicable: 6-1-14	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
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 shareholder action and shareholder action was not required.	
Dated 5-31-14 Signature 10m L De SM	_
(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)	
Tom L. Van Antuspe (Typed or printed name of person signing)	
(Title of names district)	<del></del>
(Title of person signing)	