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AUG 2 2 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BOWERS WELL DRILLING INC						
DOCUMENT NUMBER: L64095						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
HAROLD M BOWERS JR						
Name of Contact Person BOWERS WELL DRILLING INC						
4200 BEN HILL GRIFFIN RD						
FORT MEADE FL 33841						
City/ State and Zip Code JBC33841@GMAIL.COM E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
HAROLD M BOWERS JR at (863) 559-9664						
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) \$43.75 Filing Fee 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						

Articles of Amendment to Articles of Incorporation of

BOWERS WELL DRILLING INC

(Name of Corporation as currently filed with the Florida Dept. of State)

L64095

ent(s) to

If amending name, enter the new name of th	he corporation:
me must he distinguishable and contain the	word "corporation," "company," or "incorporated" or the
orp.," "Inc.," or Co.," or the designation "Cord" chartered," "professional association," or	Corp," "Inc," or "Co". A professional corporation name mu
Enter new principal office address, if applic	
rincipal office address <u>MUST BE A STREET</u>	ADDRESS)
E-ton-one welling address if anniholds.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u> </u>
To Build the North	
If amending the registered agent and/or reg new registered agent and/or the new register	zistered office address in Florida, enter the name of the ered office address:
new registered agent and/or the new register	
new registered agent and/or the new register	
new registered agent and/or the new register	(Florida street address)
Name of New Registered Agent	(Florida street address)
Name of New Registered Agent	(Florida street address)

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
1) Change	Τ	STEVEN MOREHEAD	4200 BEN HILL GRIFFIN RI
Add			FORT MEADE FL
Remove			33841
2) Change	PS	HAROLD M BOWERS JR	4200 BEN HILL GRIFFIN RI
Add			FORT MEADE FL
Remove			33841
3) Change	••••	_	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		-	<u></u>
Add			
Remove			
6) Change			
Add			
Remove			

that dansilon	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
<u> </u>	
lf an amendme	ent provides for an exchange, reclassification, or cancellation of issued shares,
provisions for	implementing the amendment if not contained in the amendment itself:
(if not app	olicable, indicate N/A)
	n A

The date of each amendment(s) add	option: 8/1/14	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : 8/1/1		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopt action was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	oted by the incorporators without shareholder action and shareholder	
Dated 8/1/14		
Signature	ald M. Bawer	 -
	rector, president or other officer - if directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
H	HAROLD M BOWERS JR	
_	(Typed or printed name of person signing)	
F	PRESIDENT	
-	(Title of person signing)	