

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CSH SERVICES, LLC

Account Number : 12007000016C Phone : (800)494-3124

Fax Number : (561) 455-9885

COR AMND/RESTATE/CORRECT OR O/D RESIGN

SNELLGROVE CONSTRUCTION, INC.

RECEIVED

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JUL 29 2009

EXAMINER

409060172326 Articles of Amendment Articles of Incorporation of SNELLGROVE CONSTRUCTION, INC. (Name of Corporation as currently filed with the Florida Deot. of State) P01000005356 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

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Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the

position.

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and fitte, name, and address of each Officer and/or Director being added; (Attach additional theets, if necessary)

Title	Neme	Address	Type of Action			
<u>VP</u>	SCOTT BARBER	9523 LORIKEET LANE PENSACOLA FL 32507	Add Remove			
			Add Remove			
			-			
K. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
)				
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)						

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			HU10001
The date of each amendment(s) ad	option: <u>7/28/2009</u>		
Effective date if applicable:			
(no n	nore than 90 days oft	er amendment file date)	l
Adoption of Amendment(s)	(CHECK ON	E)	
The amendment(s) was/were adop by the shareholders was/were suf		ers. The number of vot	es cast for the amendment(5)
The amendment(s) was/were appropriate the separately provided for a			
"The number of votes east fo	or the amendment(s) v	was/were sufficient for a	pproval
by	ig group)	"	
The smendment(s) was/were adoption was not required.	pted by the board of a	lirectors without shareh	older action and shareholder
The amendment(s) was/were adopaction was not required.	pted by the incorpora	tors without shareholder	r action and shareholder
Dated_7/28/2009			
Signature	ivie Me	umau)	
selected, b	y an incorporator – i	f in the bands of a recei	or officers have not been ver, trustee, or other court
appointed	fiduciary by that fide	ciary)	
	DIXIE	5NEH GRU	NE
	(1ypea or pair	ued name of beteon sign	ing)
****		ece:	
•	(Title of	(person signing)	