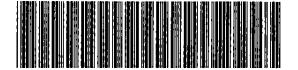
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(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL '		
(Bu	siness Entity Nar	me)		
(Do	cument Number)			
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03/01/07--01022--003 **35.00

07 MAR - 1 AM 9: 36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A E

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:		Summit One, Inc.			
DOCUMENT N	UMBER:	P0100010075	56 .		
The enclosed Arti	cles of Amendment and fee:	are submitted for filing.			
Please return all c	orrespondence concerning th	is matter to the following:			
		Kenneth G. Belsley Name of Contact Person			
	Y	Name of Contact Person			
		Summit One, Inc.			
		Firm/ Company			
	14	106 Dew Bloom Rd.			
		Address			
		lirico, Florida 33594			
	C	City/ State and Zip Code			
	kenbel E-mail address; (lo be use	sley@yahoo.com ad for luture annual report notification			
For further inform	ation concerning this matter,	please cail;			
Ke	enneth G. Belsley	at (813) Area Code & Daytime	390-9292		
Namo	of Contact Person	Area Code & Daytime	Telephone Number		
Enclosed is a chec	k for the following amount n	nade payable to the Florida Dep	partment 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)		
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci	role		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

	of		07 MAR - 1	AM 9: 36
Sum	nmit One, In	c.	Of thur ,	
(Name of Corporation as cur			pt. of State)	,
PO	1000100756	3		
	amber of Corpora			•
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:		utes, this Florida	a Profit Corporatio	on adopts the following
A. If amending name, enter the new name	of the corporati	ion:	<u>-</u> .	
Beisley	y Construction	, Inc.		The new
name must be distinguishable and vontain abbreviation "Corp.," "Inc.," or Co.," or il name must contain the word "chartered," "pi	he designation "(Corp." "Inc." or	- "Co". A professi	ional corporation
B. Enter new principal office address, if ap	oplicable:	N/A		. ,.
(Principal office address MUST BE A STRE	ET ADDRESS)			•
				
C. Enter new mailing address, if applicable		\$51A	-	-··
(Mailing address MAY BE A POST OFF	ICE BOX	N/A		
D. If amending the registered agent and/or			rid <u>a, enter the nan</u>	ne of the
new registered agent and/or the new reg	ustered omce a	naress	e i	
Name of New Registered Agent:	N/A	·		
New Registered Office Address:	(Flo	rida street addre	ss)	
			, Florida	
	(City	<i>,</i>	(Zip Code)	
New Registered Agent's Signature, if chang	ring Dogietarod	Agent-		
I hereby accept the appointment as registered			ecept the obligation	s of the position.
	Viennestanto of Man	Davietonad des	ser if alcountings	•

The date of each amendment(s) adoption: 2/28/07
Effective date if applicable: 3// 67 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
Signature (By a director, president or other officer - if directors on officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing)
PRESIASIT
(Title of person signing)

FILING FEE: \$35