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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLABORSES FLORIDA

DEC 30 2010 C MCNAIR

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: BIS Bend Routh Jackson oil
DOCUMENT NUMBER: PO 2 6000 86 816 U
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rebekah Riell
Name of Contact Person
Name of Contact Person Firm/ Company 414 Summer Drocke Dive
Tallahassee, 12 32312
City/ State and Zip Code
For further information concerning this matter, please call:
Rewriting at (80) 529 - 7900 Name of Contact Person Area Code & Daytime Telephone Number
(All December 1)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\sum_{\$43.75}\$ Filing Fee \$\sum_{\$43.75}\$ Filing Fee \$\sum_{\$43.75}\$ Filing Fee \$\sum_{\$43.75}\$ Filing Fee \$\sum_{\$643.75}\$ Certificate of Status \$\sum_{\$643.75}\$ Certificate of Status \$\sum_{\$643.75}\$ Certified Copy \$\sum_{\$643.75}\$ Filing Fee \$\sum_{\$643.75}\$ Fili
Mailing Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

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	Articles of An	nendment	هَ	酒で
	to Articles of Inco	rporation	5	0 P
f	lo (C)	9 ,	11	是 至
By Bond	healty	In Ulson	, 11e, I	Vinto I
(Name of	Corporation as currently	iiled with the Florida De	ept. of State)	CO.E.
P	0 2 0000	86816		
	(Document Number of	Corporation (if known)		
suant to the provisions of section 607.10 Articles of Incorporation:	06, Florida Statutes, this F	lorida Profit Corporation	adopts the following	g amendment(
If amending name, enter the new nam	e of the corporation:			
<u>A</u>				The new
Enter new principal office address, if incipal office address MUST BE A STI	REET ADDRESS)	N/F		
(Mailing address <u>MAY BE A POST O</u>		NA		
If amending the registered agent and	or registered office addr	ess in Florida, enter the n	ame of the	
new registered agent and/or the new	registered office address	<u> </u>		
Name of New Registered Agent	NA			-
•	(Florida stre	eet address)		-
New Registered Office Address:			, Florida	
New Registered Office Address.	- "	(City)		Code
* Registered Agent's Signature, if chereby accept the appointment as registe	anging Registered Agent: red agent. I am familiar s	i with and accept the obligat	ions of the position.	
erent accept the appointment as region	0		•	
	Signature of New R	Pegistered Agent, if changin	18	-
	DIRTIGION COLUMN			

address of each Office (Attach additional shee Please note the officer: P = President; V = Vid Executive Officer; CFO held. President, Trease Changes should be not a change, Mike Jones of Mike Jones, V as Remo	er and/or lets, if neces /director til ce Presiden O = Chief arer, Direct ted in the followers the c	Director being added: sary) le by the first letter of the offic t; T= Treasurer; S= Secretar Financial Officer. If an offic or would be PTD. Illowing manner. Currently J	ce title: ry; D= Director; TR⇒ er/director holds mor lohn Doe is listed as th	er/director being removed and title, name, and Trustee: C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is the should be noted as John Doe, PT as a Change,
Example: X Change	M	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action	Title	Name		<u>Addres</u> s
(Check One) 1) Change	$\frac{\mathbf{v}}{f}$	> Rebekal	- RIVED	414 Simme brake Drive Tallahassee, Fz
AddRemove				Tallulassee, Fz
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove			•	
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				

__ Add

____ Remove

Attach additional sheets, if necessary). (Be specific)
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m/is	
•	
	
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an amendment provides for an ex	change, reclassification, or cancellation of issued shares,
rovisions for implementing the an	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
/	
n/a	
· · · ///	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

The date of each amendment(s) as date this document was signed.	loption:	if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date variation of State's records.	will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
	proved 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 the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	12 18 18	
Signature(By 🎤	hirsetor, president or other officer - if directors or officers have not been	
	ed, by an incorporator - if in the hands of a receiver, trustee, or other court	
аррон	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	