

PO30000 27288

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

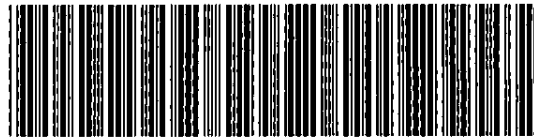
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 APR 30 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KC
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2008

LARRY M. BRILEY
SCG, INC.
10721 NW 18TH COURT
PLANTATION, FL 33322

SUBJECT: SCG, INC.
Ref. Number: P03000027288

We have received your document for SCG, INC. and check(s) totaling \$52.50. However, your check(s) and document are being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

PLEASE RETURN EVERYTHING, THE AMENDMENT AND THE REINSTATEMENT AND BOTH CHECKS WHEN THE AMENDMENT FORM IS CHANGED TO REFLECT THE NEW NAME.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 908A00024527

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SCG, Inc.

DOCUMENT NUMBER: P03000027288

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Larry M Briley

(Name of Contact Person)

SCG, Inc.

(Firm/ Company)

10721 NW 18th Court

(Address)

Plantation, FL 33322

(City/ State and Zip Code)

For further information concerning this matter, please call:

Larry M Briley

(Name of Contact Person)

at (954) 474-2966

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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)

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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

(Document number of corporation (if known))

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A.")

[illegible]

(continued)

The date of each amendment(s) adoption: 4/29/08

Effective date if applicable: _____
(no more than 90 days after amendment file date)

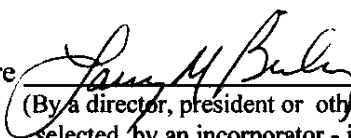
Adoption of Amendment(s) (CHECK ONE)

- ☒ 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 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)

Larry M Briley

(Typed or printed name of person signing)

CEO

(Title of person signing)

FILING FEE: \$35