P04000027327

(Re	equestor's Name)	····
(Ac	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies Certificates of Status		of Status
Special Instructions to	Filing Officer:	

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10/13/11--01004--003 **35.00



John John John

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BISHOPS HOLLING SCIVICE, INC.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sean Bishop Name of Contact Person
BHS Bobcot Service, Inc.
1035 Fishermans Drive
OSteen, FL 32764 City/ State and Zip Code
bishoshauling a Vahou. Com E-mail address: (to be used for future Innual report notification)
For further information concerning this matter, please call:
Sean Bishop at (407) 323-1220 Name of Contact Person at (407) 323-1220 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Scrifficate of Status Status Status Status Status Status Status Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Scriffied 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 13, 2011

SEAN BISHOP 1035 FISHERMANS DRIVE OSTEEN, FL 32764

SUBJECT: BISHOP'S HAULING SERVICE, INC.

Ref. Number: P04000027327

We have received your document for BISHOP'S HAULING SERVICE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Letter Number: 711A00023561

Carol Mustain Regulatory Specialist II

www.sunbiz.org

Articles of Amendment

to

Articles of Incorporation

of

(Chance of Got portation as currently fried with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
BHS Bobcat Scivice, Inc. The new
name must be distinguishable and contain the word "corporation," "company," or "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
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Office Address: (Florida street address)
OSteen, Florida 32764 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

-

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) **Type of Action Title** <u>Name</u> Address ☐ Add ☐ Remove E. 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)

The date of each amendment(s) adoption: $10-1-201$		
. `	(date of adoption is required)	
Effective date if applicable:	(no more than 90 days after amendment file date)	
•	'no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	voting group)	
(*	voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	-6-11	
select	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court need fiducions by that fiducions	
appor	nted fiduciary by that fiduciary)	
	Scan bishop (Typed or printed name of person signing)	
	President	
	(Title of person signing)	