P04000131873

(Re	equestor's Name)	
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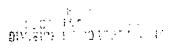
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TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SOUTH FLORIDA	GRADING INC				
	DOCUMENT NUMBER: P04000131873					
The enclosed Articles o	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corresp	ondence concerning this matt	ter to the following:				
7	TIMOTHY O REYNOLDS					
_		Name of Contact Person				
5	SOUTH FLORIDA GRADIN	G INC				
-		Firm/ Company				
8	839 SOUTH KINGS HIGHWAY					
_	Address					
Ŧ	FORT PIERCE, FL 34945					
_		City/ State and Zip Code				
SFGSI	TEWORK@AOL.COM					
	E-mail address: (to be use	ed for future annual report notification)				
For further information	concerning this matter, please	e call:				
TIMOTHY REYNOLI	os .	at (561 436-8066				
Name of	Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:						
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)				
Amen Divisi P.O. I	ng Address Idment Section Ion of Corporations Box 6327	Street Address Amendment Section Division of Corporations Clifton Building				
Tallal	1855ee FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



SOUTH FLORIDA GRADING INC

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SOUTH FLORIDA GRADING INC	············		
(<u>Name</u> P04000131873	of Corporation as curren	tly filed with the Florida Dept, of State)	
F04000131873	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	•	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation:		
	nation "Corp," "Inc," or	The new on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		839 SOUTH KINGS HIGHWAY	
		FORT PIERCE, FL 34945	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		839 SOUTH KINGS HIGHWAY	
		FORT PIERCE, FL 34945	
D. If amending the registered agent ar new registered agent and/or the ne			
Name of New Registered Agent	TIMOTHY O REYNOL		
	839 SOUTH KINGS HIG	GHWAY	
	(Florida s	treet address)	
New Registered Office Address:	FORT PIERCE	. Florida 34945	
		(City) (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as registered.	ered agent. I am familiar	with and accept the obligations of the position.	
•	Signature of Wew	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)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. \ If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	ALLISON REYNOLDS	3329 SW MCMULLEN ST
Add			PORT ST LUCIE, FL 34953
X Remove			
2) X Change	P	TIMOTHY O REYNOLDS	3329 SW MCMULLEN ST
Add			PORT ST LUCIE, FL 34953
Remove			
3) Change			_
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			_
Add			
Remove			
6) Chanca			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
CHANGING THE PRESIDENT AND OWNERSHIP OF COMPANY REMOVING ALLISON REYNOLDS AS
PRESIDENT AND 100% OWNER TO TIMOTHY REYNOLDS AS PRESIDENT AND 100% OWNER OF COMPA
CHANGING THE REGISTERED AGENT FROM ALLISON REYNOLDS TO TIMOTHY REYNOLDS.
NEW TITLES ARE AS FOLLOWS:
TIMOTHY O REYNOLDS IS PRESIDENT, REGISTERED AGENT AND 100% OWNER OF SOUTH FLORIDA
GRADING INC.
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)
SHARES ARE 100% TO TIMOTHY REYNOLDS.

The date of each amendment(s	MAY 28, 2015 s) adoption:	if other than the
date this document was signed.		if other than the
I	MAY 28, 2015	att see the same of
Effective date if applicable:	(no more than 90 days after amendment file date)	15 JUN -2 PM 3: 45
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendre sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s)	
	cast for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
	adopted by the board of directors without shareholder action and share	cholder
action was not required. MAY 2 Dated Signature	Im Wh	
(By	a director, president or other officer - if directors or officers have not	been
	cted, by an incorporator - if in the hands of a receiver, trustee, or other	r court
арр	pointed fiduciary by that fiduciary)	
	TIMOTHY O REYNOLDS	
	(Typed or printed name of person signing)	
	PRESIDENT AND REGISTERED AGENT	
	(Title of person signing)	