P04000/4/949

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Amend Thewis 11-19-09

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Soil Tech of Florida, Inc
DOCUMENT NUMBER: <u>PO 4000 141 949</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Soil Tech of Flourida Inc
5107 SE Sweethrian Tennace Address
Hobe Sound Florida 33455 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Jeooch 144 (a) be/kouthine f at (272) 263-0277 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 Certificate of Status □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

November 3, 2009

JAMES J. ROACH SOIL TECH OF FLORIDA, INC. 5107 SE SWEETBRIER TERRACE HOBE SOUND, FL 33455

SUBJECT: SOIL TECH OF FLORIDA, INC.

Ref. Number: P04000141949

We have received your document for SOIL TECH OF FLORIDA, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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) 245-6905.

Thelma Lewis Document Specialist Supervisor

Letter Number: 309A00034704

Articles of Amendment,

Ai	of	1	FILED
Soil Tech of	- Flontide,	Inc.	7009 NOV
(Name of Corporation as curren	tly filed with the Florids	Dept. of State)	7009 NDV 17 P 4: 09
<i>PO 4000141 949</i> (Document Numb			SECRETARY OF STATE TALLAHASSEE, FLORIDA
(Document Numb	er of Corporation (if know	vn)	AND SEE. FLORIDA
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this Fl	orida Profit Corporati	on adopts the following
A. If amending name, enter the new name of t	he corporation:		
name must be distinguishable and contain th abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe	lesignation "Corp," "Inc,	" or "Co". A profess	ional corporation
B. Enter new principal office address, if appli			
(Principal office address <u>MUST BE A STREET</u>	ADDRESS)		
·			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		
D. If amending the registered agent and/or renew registered agent and/or the new registered.		Florida, enter the na	me of the
Name of New Registered Agent:			
		,	
New Registered Office Address:	(Florida street a	ddress)	
_	•	, Florida	1
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing			
I hereby accept the appointment as registered ag	ent. I am familiar with a	nd accept the obligation	is of the position.
		1.4	
Sig	mature 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)

Title	Name	Address	Type of Action
<u>D</u>	Lee Bonyai	4107, College Dr. Odden, UT 8440}	□ Add Remove
<u>D</u> _	Diane Bonyai	4109 (dl/ege Dn Ogden, UT 84403	☐ Add ☐ Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter ch		
(attach addii	tional sheets, if necessary). (Be specific,)	
			
	ndment provides for an exchange, reclas		
	applicable, indicate N/A)	t contained in the amendment is	<u> </u>
		And the second s	
			· · · · · · · · ·

The date of each amendment(s) ac	loption:	10/27/09	
•		ion is required)	
Effective date <u>if applicable</u> :		10/2/11/09	·
(no	more than 90 days after ame	ndment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The fficient for approval.	he number of votes cast for the	amendment(s)
The amendment(s) was/were approvided for			
"The number of votes cast f	or the amendment(s) was/we	ere sufficient for approval	
by		,,, ,	
(voti	ng group)		
The amendment(s) was/were add action was not required.	opted by the board of director	rs without shareholder action ar	nd shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators wi	ithout shareholder action and sh	areholder
Dated/0/_	0 10	· -	
Signature	Tama & Ko	ach	
(By a dire selected,		cer – if directors or officers have e hands of a receiver, trustee, or	
_	James N	TRoach	
	(Typed or printed na	me of person signing)	
	Dinecton		
	(Title of person signing)		_