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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
AND ASSECT FOR ORIGINAL AS

MC 5/20/09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	BLAYDE GRADING IN	<u>C.</u>
DOCUMENT NUM	MBER:	P04000146745	
The enclosed Article	es of Amendment and fee a	are submitted for filing.	
Please return all cor	respondence concerning th	is matter to the following:	
_		LIAM R. TRIPLETT	
	Ŋ	Name of Contact Person	
BLAYDE GRADING INC.		YDE GRADING INC.	
		Firm/ Company	
_		PO Box 195208	
Address			
_		Springs FL 32719-5208	
	· C	tity/ State and Zip Code	
	E-mail address: (to be use	cci @cfl.rr.com d for future annual report notification)	
For further informat	ion concerning this matter,	please call:	
WILLI	AM R. TRIPLETT	at (407)40	022236
Name o	f Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check	for the following amount n	nade payable to the Florida Depart	ment of State:
☑ \$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 Add		Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	۵

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

BLAYDE GRADING INC.

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

P04000146745

	Articles of Amendment	j's
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•	Articles of Incorporation	A STATE OF A
	of	460p. 1/2 S
BLAYI	DE GRADING INC.	AHARA PA
· · · · · · · · · · · · · · · · · · ·	urrently filed with the Florida D	Pept. of State)
1	04000146745	ept. of State)
	Number of Corporation (if known	
rsuant to the provisions of section 607. nendment(s) to its Articles of Incorporation		da Profit Corporation adopts the follow
If amending name, enter the new nam	e of the corporation:	
BLAYDE EXCAVA	ATING AND CONTRACTING	SINC. The new
ame must be distinguishable and conta obreviation "Corp.," "Inc.," or Co.," or time must contain the word "chartered," '	the designation "Corp," "Inc,"	ompany," or "incorporated" or the or "Co". A professional corporation
		uonevanor 1.11.
Enter new principal office address, if	applicable:	
Enter new principal office address, if rincipal office address MUST BE A STR	applicable: EET ADDRESS)	
Enter new principal office address, if rincipal office address MUST BE A STR	applicable: EET ADDRESS) ble: FICE BOX) or registered office address in F	
Enter new principal office address, if principal office address MUST BE A STR. Enter new mailing address, if applica (Mailing address MAY BE A POST OF MAY BE	applicable: EET ADDRESS) ble: FICE BOX) or registered office address in F	lorida, enter the name of the
Enter new principal office address, if principal office address MUST BE A STR. Enter new mailing address, if applica (Mailing address MAY BE A POST OF It amending the registered agent and/new registered agent and/or the new remailing of New Registered Agent:	applicable: EET ADDRESS) ble: FFICE BOX) or registered office address in F registered office address:	lorida, enter the name of the
Enter new principal office address, if rincipal office address MUST BE A STR Enter new mailing address, if applica (Mailing address MAY BE A POST OF IT amending the registered agent and/new registered agent and/or the new remailing of New Registered Agent:	ble: or registered office address in Fregistered office address: (Florida street addr	lorida, enter the name of the
Enter new principal office address, if rincipal office address MUST BE A STR Enter new mailing address, if applica (Mailing address MAY BE A POST OF IT amending the registered agent and/new registered agent and/or the new remailing of New Registered Agent:	applicable: EET ADDRESS) ble: FFICE BOX) or registered office address in F registered office address:	lorida, enter the name of the

If amending the Officers and/or Directors, enter the title and name of each officer/director being removett and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			П р
			D Damana
	nding or adding additional Article udditional sheets, if necessary). (
		•	
provis	nmendment provides for an exchasions for implementing the amend not applicable, indicate N/A)		

The date of each amendment(s) adoption: 5-12-2009		
Effective date if applicable:	MAY 12, 2009	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement ed 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)	
action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated MA` Signature	(12,2009 L	
(By	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	WILLIAM R. TRIPLETT	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	