Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150001801823)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION

Account Number : FCA000000023

Phone : (850) 205-8842

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:		

COR AMND/RESTATE/CORRECT OR O/D RESIGN THORPE-SUNBELT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	0.5/6
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

7/24/2015



July 27, 2015

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LEACON-SUNBELT, INC.

FAX FILING*CT CORPORATION SYSTEM**
P O BOX 330407

BOUSTON, TX 77233

SUBJECT: LEACON-SUNBELT, INC.

REF: P04269

RE-SUDMIT

वदार व अविमान्त्रिक निम्

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date in the section 4 is incorrect. Please correct your document accordingly.

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) 245-6050.

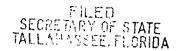
Tina D Cannon Regulatory Specialist II FAX Aud. #: H15000180182 Letter Number: 815A00015673

RECEIVED
15 JUL 27 PM 1: 59

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Amen Divisi	dment Section on of Corporations	
SUBJECT:	HORPE-SUNBELT, INC.	
_	Name	of Corporation
DOCUMEN	T NUMBER: P04269	
The enclosed	Amendment and fee are subm	itted for filing.
Please return	all correspondence concerning	this matter to the following:
JUDY CRAWF	ORD	
	Name of Contact Person	
THORPE SPEC	CIALTY SERVICES CORPORATIO	И
	Firm/Company	
6833 Kirbyville	St.	
	Address	
Houston, TX 77	7033	
	City/State and Zip Code	
E-mail ad	dress: (to be used for future annu	al report notification)
For further in	formation concerning this mat	ter, please call:
Nam	ne of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a	check for the following amoun	nt:
\$35.00 Fil	ing Fee \$43.75 Filing Fee & Certificate of Status	\$ \$43.75 Filing Fee & Certified Copy (Additional copy is chelosed) \$ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is chelosed)
Mailing Add Amendment S Division of C P.O. Box 632 Tallahassee, I	Section Corporations 17	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



15 JUL 24 AM 10: 45

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

P04269	
	Document number of corporation (if known)
THORPE-SUNBELT, INC.	
(Name of corpo	ation as it appears on the records of the Department of State)
, Texas	3. 03/08/2010
(Incorporated under law	
(4-7 CC	SECTION II PMPLETE ONLY THE APPLICABLE CHANGES)
4. If the amendment changes the name	of the corporation, when was the change effected under the laws of
its jurisdiction of incorporation? 12/3	92014 As just
Thorpe Plant Services, Inc.	Winns -
(Name of corporation after the amen appropriate abbreviation, if not con	ment, adding suffix "corporation," "company," or "incorporated," or ained in new name of the corporation)
(If new name is unavailable in Florid business in Florida)	, enter alternate corporate name adopted for the purpose of transacting
5. If the amendment changes the period	of duration, indicate new period of duration.
	(New duration)
7. If the amendment changes the jurisdi	ction of incorporation, indicate new jurisdiction.
	(New jurisdiction)
8. Attached is a certificate or document 90 days prior to delivery of the appli having custody of corporate records	of similar import, evidencing the amendment, authenticated not more than ation to the Department of State, by the Secretary of State or other official in the jurisdiction under the laws of which it is incorporated.
(Signature of a director, president or of a receiver or other court appoint	other officer—if to the hands d fiduciary, by that fiduciary)
Jeffrey G. Beetz	Executive Vice President
(Typed or printed name of person	n signing) (Title of person signing)

7/27/2015 11:59:01 AM From: To: 8506176380(5/6)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



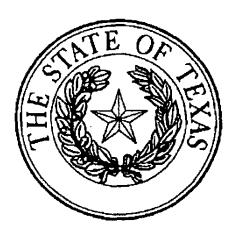
Carlos H. Cascos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on December 30, 2014, THORPE-SUNBELT, INC., a Domestic For-Profit Corporation (file number 68946800), changed its name to Thorpe Plant Services, Inc.

> In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 24, 2015.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Carlos H. Cascos Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/

TID: 10254

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services Document: 617379290006 7/27/2015 11:59:01 AM From: To: 8506176380(6/6)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for Thorpe Plant Services, Inc. (file number 68946800), a Domestic For-Profit Corporation, was filed in this office on January 30, 1984.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 23, 2015.



Culc Carlos H. Cascos

Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx.us/

Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 617319810005