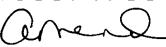
(Requestor's Name)
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COVER LETTER

TO: Amendment Section . Division of Corporations

NAME OF CORI	PORATION:	Big Ideas Group, Inc.	
DOCUMENT NUMBER:		P05000005547	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		John A. Taylor	
	Γ	lame of Contact Person	
	Fassett	, Anthony & Taylor, P.A.	
		Firm/ Company	
	132	25 W. Colonial Drive	
		Address	
	C	Orlando, FL 32804	
	C	City/ State and Zip Code	
<u></u>	JTaylor E-mail address: (to be use	@fassettlaw.com ed for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
Nome	John A. Taylor	at (407) 872-0200 Area Code & Daytime Telephone Number	
		nade payable to the Florida Department of State:	
Enclosed is a chec	k for the following amount i	hade payable to the Florida Department of State.	
	□ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)	osed)
Mailing A Amendmen		Street Address Amendment Section Division of Corporations	
P.O. Box 6	•	Clifton Building 2661 Executive Center Circle	
i aiiaiiasse	0, I L J2J14	Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation

FILED

C.	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
		•
_	If am anding the posistaned agent and/or registered affic	no address in Warida antar the name of th

Name of New Registered Agent:	44	
New Registered Office Address:	(Florida street ac	ddress)
		, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

new registered agent and/or the new registered office address:

B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

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)

<u>Title</u>	Name	Address	Type of Action
DPST	Tim Wilhelm	10751 SE 141st Avenue Road Ocklawaha, FL 32179	☑ Add □ Remove
PST	Lori Ann Wilhelm	10751 SE 141st Avenue Road Ocklawaha, FL 32179	☐ Add ☑ Remove
			☐ Add ☐ Remove
	ling or adding additional Articles, entu iditional sheets, if necessary). (Be spe		
****	·		
		·	
provisio	nendment provides for an exchange, remains for implementing the amendment is of applicable, indicate N/A)		

The date of each amendment(s) adoption:
(date of adoption is required)
Effective date if applicable: (no more than 90 days after amendment file date)
(no more inan 90 days after amenament file date)
A dente of A constant (CVIRCH ONE)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 10 11 10
(By a director, president or other officer – if directors or officers have not been selected/by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Title of person signing)