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L&M Enterprises of Lake County, Inc.

Lorraine M. Slocomb, E.A.
Accountant
P.O. Box 730
Altoona, FL 32702-0730

Telephone (352) 669-3713
Fax (352) 669-9632

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ray Bryant Coverall Insurance, Inc.

DOCUMENT NUMBER: P05000023061

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lorraine M. Slocomb
L & M Enterprises of Lake County, Inc.
P O Box 730
Altoona, FL 32702-0730

For further information concerning this matter, please call:

Lorraine M. Slocomb, E.A. at (352) 669-3713

Enclosed is a check for the \$35.00 Filing Fee.

Articles of Amendment
To
Articles of Incorporation
Of

Ray Bryant Coverall Insurance, Inc.

Document Number: P05000023061

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment to its Articles of Incorporation:

AMENDMENTS ADOPTED:

- Article I: The name of the corporation shall be changed to: Bryant Coverall Insurance, Inc.
- Article IV: The new registered agent is George Bryant at 1551 N State Road 19, Eustis, FL 32726.
- Article VII: The following officers have resigned:
Director: Ray Bryant, Jr.
- Article VII: The following officer has been elected as Vice President:

Ray Bryant, Sr.
45445 N State Road 19
Altoona, FL 32702

The date of the adoption of these amendments is June 21, 2005.

The amendments were approved by the shareholders. The number of votes cast for the amendments by the shareholders were sufficient for approval.

Signed this 21st day of June, 2005


George Bryant, President

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBNITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

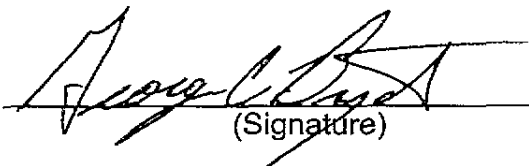
1. The name of the corporation is: Bryant Coverall Insurance, Inc.
2. The name and address of the registered agent and office is:

George Bryant

1551 N State Road 19

Eustis, FL 32726

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)

6-21-05
(Date)