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Office Use Only



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Change

12-2-08 DC

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Advanced Waterproofing + Restoration, I
DOCUMENT NUMBER: P0500065314
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SCOT M. JACGER (Name of Contact Person)
Advanced Watuproofing + Restoration (Firm/Company)
1075 PAPAYA Street
Hollywood F (33019 (City/State and Zip Code)
For further information concerning this matter, please call:
Scot Jaecel at (754) 581-0368 (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 Certificate of Status (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations Street Address Amendment Section Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation of

Advanced Waterp		Restoratio	u, INC.
(Name of Corporation as clu	rrently filed with th	e Florida Dept. of S	State)
P0500	00653	14	
(Document N	lumber of Corporation	n (if known)	
Pursuant to the provisions of section 607.1 following amendment(s) to its Articles of Inc. A. If amending name, enter the new name SabreCon The new name must be distinguishable "incorporated" or the abbreviation "Corp. "Co". A professional corporation no association," or the abbreviation "P.A."	corporation: cof the corporation Corporation and contain the """Inc.," or Co.,	word "corporation" or the designation	a," "company," or a "Corp," "Inc," or
B. Enter new principal office address, if a (Principal office address MUST BE A STR)			TALL SE
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF</u>)			NOV TO THE PROPERTY OF THE PRO
D. If amending the registered agent and/o new registered agent and/or the new re			enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Floria	a street address)	
	 		, Florida (Zip Code)
		(City)	(Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registed position.	nging Registered Ag red agent. I am fo	ent: amiliar with and ac	cept the obligations of the
_	Signature of New I	Registered Agent, if c	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>	<u>Name</u>	Address	Type of Action
		· · · · · · · · · · · · · · · · · · ·	
			Add Remove
			🖸 Add
			Remove
pro		nange, reclassification, or cancellation and the amendation if not contained in the amendation in the	

The date of each amendment(s) adoption:
. Effective date <u>if applicable</u> :	12 - 1 - 08 (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
` '	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	"
((voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	11-15-08
selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court
арро	inted fiduciary by that fiduciary)
	Scot M. JAEGER
	Scot M. Jaever (Typed or printed name of person signing)
	President
	(Title of person signing)