

P060000 64535

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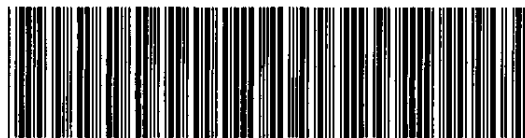
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FILED  
06 JUN -2 AM 8:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MC  
Sf

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CAMELOT CONTRACTORS GROUP INC.  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARSHA SIHA

(Name of Person)

INCFILE.COM, LLC

(Firm/Company)

14027 MEMORIAL DRIVE #110

(Address)

HOUSTON TX 77079

(City/State and Zip Code)

For further information concerning this matter, please call:

MARSHA SIHA

(Name of Person)

at ( 888 ) 462-3453 X 555

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 19, 2006

MARSHA SIHA  
INCFILE.COM, LLC  
14027 MEMORIAL DRIVE #110  
HOUSTON, TX 77079

SUBJECT: CAMELOT CONTRACTORS GROUP INC.  
Ref. Number: P06000064535

We have received your document for CAMELOT CONTRACTORS GROUP INC. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Filing fee is 35.00 balance due 10.00.

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) 245-6908.

Sylvia Gilbert  
Document Specialist

Letter Number: 106A00035374

RECEIVED  
06 JUN -2 AM 8:00  
DIVISION OF CORPORATIONS

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Camelot Contractors Group, Inc.

DOCUMENT NUMBER: PO6000064535

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

Please return all correspondence concerning this matter to the following:

Marsha Siha  
(Name of Contact Person)

INC file. com LLC  
(Firm/ Company)

14027 Memorial Drive #110  
(Address)

Houston, tx. 77079  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Marsha Siha at ( 888 ) 462-3453 x555  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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 Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

Camelot Contractors Group INC  
(Name of corporation as currently filed with the Florida Dept. of State)

**FILED**  
06 JUN -2 AM 8:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P06000064535

(Document number of corporation (if known))

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

**NEW CORPORATE NAME (if changing):**

Camelot Contracting Group Inc.  
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (**BE SPECIFIC**)

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(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

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(continued)

The date of each amendment(s) adoption: May 10, 2006

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were approved 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.

Signature Kristine Lamb  
(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)

Kristina Lamb  
(Typed or printed name of person signing)

Director  
(Title of person signing)

FILING FEE: \$35