

PO8000016936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

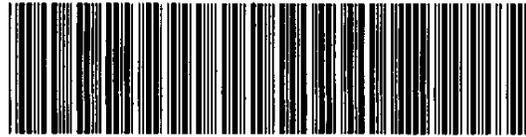
(Document Number)

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*JS*

2010 SEP 16 AM 9:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** BIG SKY SOLUTIONS INC

**DOCUMENT NUMBER:** P08000016926

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

Please return all correspondence concerning this matter to the following:

NICHOLAS PELL

Name of Contact Person

BIG SKY SOLUTIONS INC

Firm/ Company

823 PADUA LANE

Address

CLEARWATER, FL 33756

City/ State and Zip Code

LAURACONDUCT256@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICHOLAS PELL

Name of Contact Person

at ( 813 )

679-7926  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$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

**BIG SKY SOLUTIONS INC**

(Name of Corporation as currently filed with the Florida Dept. of State)

**P08000016926**

(Document Number of Corporation (if known))

FILED  
2010 SEP 16 AM 9:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. If amending name, enter the new name of the corporation:**

\_\_\_\_\_ *The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Enter new mailing address, if applicable:**  
*(Mailing address **MAY BE A POST OFFICE BOX**)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent:* \_\_\_\_\_

*New Registered Office Address:* \_\_\_\_\_  
*(Florida street address)*

\_\_\_\_\_, Florida  
*(City) (Zip Code)*

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

*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> | <u>Name</u>        | <u>Address</u>   | <u>Type of Action</u>  |
|--------------|--------------------|--|--|
| <u>S</u>     | <u>DONNA BAUM</u>  | <u>425 22ND AVE N STE B</u><br><u>ST PETERSBURG FL 33704</u> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| <u>P</u>     | <u>JOSEPH BAUM</u> | <u>425 22ND AVE N STE B</u><br><u>ST PETERSBURG FL 33704</u> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| <u>VP</u>    | <u>LAURA PELL</u>  | <u>823 PADUA LANE</u><br><u>CLEARWATER, FL 33756</u>         | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

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**F. If an amendment provides for an 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)*

N/A

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**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>            | <u>Address</u>                                       | <u>Type of Action</u>  |
|--------------|------------------------|--|--|
| <u>VP</u>    | <u>NICHOLAS PELL</u>   | <u>823 PADUA LANE</u><br><u>CLEARWATER, FL 33756</u> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| <u>P</u>     | <u>NICHOLAS PELL</u>   | <u>823 PADUA LANE</u><br><u>CLEARWATER, FL 33756</u> | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| <u>T</u>     | <u>BENJAMIN MERCER</u> | <u>823 PADUA LANE</u><br><u>CLEARWATER, FL 33756</u> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

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*(if not applicable, indicate N/A)*

N/A

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**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>     | <u>Address</u>                         | <u>Type of Action</u>  |
|--------------|-----------------|--|--|
| VP           | BENJAMIN MERCER | 823 PADUA LANE<br>CLEARWATER, FL 33756 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| _____        | _____           | _____                                  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
| _____        | _____           | _____                                  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

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*(if not applicable, indicate N/A)*

N/A

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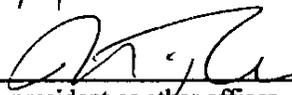
The date of each amendment(s) adoption: 9-13-10  
(date of adoption is required)

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

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 9/13/10

Signature   
(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)

NICHOLAS PELL  
(Typed or printed name of person signing)

VP  
(Title of person signing)