## P09000019590

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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FILED SECRETARY OF STAIL IVISION OF CORPORATIONS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR   | ATION: Smith Chai                          | llenger Manufacturin  | ng and Seevices, Inc  |
|--|--|---|---|
| DOCUMENT NUME  | er: <u>P09000</u>                          | 0019596   | <del> </del>  |
| The enclosed Articles  | of Amendment and fee are                   | submitted for filing.   |   |
| Please return all corres   | pondence concerning this                   | matter to the following:  |   |
|  |  | Smith<br>ne of Contact Person   |   |
| Sm   | with Challenger                            | Manufacturing Firm/ Company   | and Services, Inc   |
| 13   | 03 Timberidge                              | Loop South  |   |
|  | Lakeland, FL                               |   | <del></del>   |
|  | KBLK Chall<br>E-mail address: (to be used  | engena aol, comfor fueltre annual report notification)  | <u>)                                    </u>  |
| For further information  | concerning this matter, pl                 | lease call:   |   |
|  | Smith<br>ontact Person                     | at ( <u>863</u> ) <u>513</u><br>Area Code & Daytime Tele  | -5681<br>ephone Number  |
| Enclosed is a check for  | the following amount ma                    | de payable to the Florida Depart  | ment 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 Se Division of Cor P.O. Box 6327 Tallahassee, FL | ction<br>porations                         | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | ę   |

## Articles of Amendment to Articles of Incorporation of

| Smith Challenger Manu  | facturing and  | Services, Inc                        | . •   |
|--|--|--------------------------------------|---|
|  | 95.9/a   | la Dept. of State)                   |   |
| (Document Num  | ber of Corporation (if known   | own)                                 |   |
| Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:  | 6, Florida Statutes, this <i>F</i>   | <i>llorida Profit Corporation</i> ad | opts the following  |
| A. If amending name, enter the new name of   | the corporation:   |                                      |   |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prog B. Enter new principal office address, if app (Principal office address MUST BE A STREE)  C. Enter new mailing address, if applicable:  | designation "Corp," "In<br>fessional association," or<br>licable:<br>TADDRESS) | c," or "Co". A professional          | The new ted" or the corporation 3ECRETARY OF STATE CORPORATION OF |
| D. If amending the registered agent and/or registered agent and/or the new registered agent ag | egistered office address   | n Florida, enter the name of         | ```   |
| Name of New Registered Agent:  | tereu omee audress.  |                                      |   |
| New Registered Office Address:   | (Florida street  | address)                             |   |
|  |  | , Florida<br>(Zip Code)              |   |
|  | (City)   | (Zip Code)                           |   |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered a  |  | and accept the obligations of t      | he position.  |
|  | ignature of New Registere  | d Agent, if changing                 |   |

Page 1 of 3

## 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      |
|--------------|--|---|---------------------|
| <u></u>      | Kyle J. Smith  | 1303 Timberidge Lp So<br>Lakeland, FL 33809 | . □ Add<br>■ Remove |
|              |  |   | ☐ Add<br>☐ Remove   |
|              |  |   | ☐ Add<br>☐ Remove   |
|              | ng or adding additional Articles, enter c<br>itional sheets, if necessary). (Be specific               |   |                     |
|              |  |   |                     |
| provision    | ndment provides for an exchange, reclass for implementing the amendment if neapplicable, indicate N/A) |   |                     |
|              |  |   |                     |
|              |  |   |                     |
|              |  |   |                     |

| The date of each amendment(s                          | ) adoption: $9-23-201/$   |
|---|---|
| i .<br>Effective date <u>if applicable</u> : _        | (date of adoption is required) 9-23-2011  |
| <u> </u>  | 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 | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.   |
|   | 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 ca                               | st for the amendment(s) was/were sufficient for approval  |
| by  | .,,,  |
| (   | poting group)   |
| The amendment(s) was/were action was not required.    | adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/were action was not required.    | adopted by the incorporators without shareholder action and shareholder   |
| Dated   | 9-22-2011   |
| selec   | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other count nted fiduciary by that fiduciary) |
|   | (Typed or printed name of person signing)   |
|   | Secretary / Treasurer (Title of person steming)   |