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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Pow-Pow's	Lockout Service	e, Inc.
DOCUMENT NUME	BER: P1000004724	6	
	of Amendment and fee are su		
Please return all corres	spondence concerning this ma	tter to the following:	
	Shelly Powell		
	<u>-</u>	Name of Contact Person	1
	Guilday, Schwartz	, Simpson, West	, Hatch & Lowe, P.A.
		Firm/ Company	
	3042 Crawfordvil	le Highway	
		Address	
	Crawfordville, Flo	orida 32327	
		City/ State and Zip Code	₹
she	elley@francielowe	.com	
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se cali:	
Shelly Powel	l	at (850	, 926-8245
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address Industrial Section	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

Pow-Pow's Lockout Service, Inc.		
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
P10000047246		
(Document Number of Corporation (if k	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following	; amendment(s) to
A. If amending name, enter the new name of the corporation:		
Pow-Pow's Lockout & Emergency Roadsid	le Service, Inc.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	" "company," or "incorporated" or the ab o". A professional corporation name must c	breviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		3 SEE
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	ECRETAR SIGN OF C
Name of New Registered Agent		
		14
(Florida street	t address)	ATION 25
New Registered Office Address:	, Florida	į.
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position.	
Signature of New Registered Ag	vent, 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	<u>PT</u>	John Do	<u>be</u>		
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s	
1) Change	<u></u>	_	Scott Rojas	47 Spokan Trail	
Add				Crawfordville, FL 32327	
Remove					
2) Change					
		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove				•	
5) Change		_			
Add					
Remove					
				·	
6) Change		_			
Add					
Remove					

vii aaaii	ional sheets, if neces	sary). (Be spe	cific)			
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an amend	ment provides for a	n avchonga rac	lessification o	r cancellation of	issued shares	
	or implementing th					
(if not a	pplicable, indicate i	V/A)				
				••		
			••			

the date of each amendment(s) adoption: November 1, 2013 date this document was signed.	, if other than the
Effective date if applicable: November 1, 2013	
(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) was/were sufficient for approval.	endment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The followin must be separately provided for each voting group entitled to vote separately on the amendment	
"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 s action was not required.	hareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	holder
Dated November 1, 2013	
Signature Joseph S. Powell	
(By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Joseph S. Powell	
(Typed or printed name of person signing)	
President	
(Title of person signing)	