P10000093958

| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: Florida Property C | leanout, Inc. | |
|-------------------------|--|--|--|
| DOCUMENT NUM | BER: P10000093958 | | |
| The enclosed Articles | of Amendment and fee are su | ibmitted for filing. | |
| Please return all corre | spondence concerning this ma | tter to the following: | |
| | Charles Abels Massie, CPA | | • |
| | | Name of Contact Person | n |
| | Massie & Reilly, CPAs, PLL | .c | |
| | | Firm/ Company | |
| | 15671 San Carlos Blvd., Suit | te 201 | |
| | | Address | |
| | Fort Myers, FL 33908 | | |
| | | City/ State and Zip Cod | e |
| charl | esm@cpamassie.com | | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| | | , | |
| For further informatio | n concerning this matter, pleas | se call: | |
| Charles Abels Massie | , CPA | at (| 768-2171 |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check fo | or the following amount made | payable to the Florida Depa | artment of State: |
| S35 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) |
| Am Div P.O | iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314 | Amend Divisio Clifton | Address Iment Section on of Corporations Building Executive Center Circle |

Tallahassee, FL 32301



October 12, 2016

CHARLES ABELS MASSIE, CPA MASSIE & REILLY, CPA'S PLLC 15671 SAN CARLOS BLVD - STE. 201 FORT MYERS, FL 33908

SUBJECT: FLORIDA PROPERTY CLEANOUT, INC.

Ref. Number: P10000093958

We have received your document for FLORIDA PROPERTY CLEANOUT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2016 corporate annual report/uniform business report form. To reinstate, the corporation must submit a completed reinstatement application or a current corporate annual report/uniform business report form and the appropriate fees.

In order to file your document, the subject entity must first be reinstated.

The total amount due to reinstate is \$750.00.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 016A00021956

Articles of Amendment to Articles of Incorporation of

| Florida Property Cleanout, Inc. | | | | |
|--|---------------------------------|--|-------------------------------------|-----------------|
| (Name of Corporati | ion as currently filed | with the Florida De | ept. of State) | |
| P10000093958 | | | | |
| (Docur | nent Number of Corpo | oration (if known) | | |
| Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation: | a Statutes, this <i>Florida</i> | a Profit Corporation | adopts the following | ng amendment(s) |
| A. If amending name, enter the new name of the co | orporation: | | | |
| Snyder Trucking, Inc. | | | | The new |
| name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the | ," "Inc," or "Co" | ompany," or "incor A professional corpo | porated" or the operation name must | bbreviation |
| B. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD | | | | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u> | <u></u> | | 7.00 CECENTRAL 2017 | 2016 OCT 24 AVI |
| D. If amending the registered agent and/or register | | Florida, enter the n | ame of the | <u>ښ</u> |
| Name of New Registered Agent | office address: | | <u> </u> | უ - |
| · · | (Florida street addr | ess) | | - |
| New Registered Office Address: | | | , Florida | |
| | (City) | | (Zip | Code) |
| New Registered Office Address: New Registered Agent's Signature, if changing Registered agent. In the second seco | (City) istered Agent: | | (Zip | Code) |
| <u> </u> | ture of New Registere | J. 4 4 · 6 · 3 | | = |
| Signa | uure oi New Keastere | a Agent it 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>oe</u> | | | | |
|-------------------------------|-----------|----------|-------------|---|---|------------|---------|
| X Remove | <u>v</u> | Mike Jo | ones | | | | |
| X Add | <u>sv</u> | Sally Si | <u>mith</u> | | , | | |
| Type of Action (Check One) | Title | | Name | | | | Address |
| 1) Change | | _ | | | | - ` | |
| Add | | | | | | | |
| Remove | | | | | · | | |
| 2) Change | | _ | | • | · | _ | |
| Add | | | | | | | |
| Remove | | | | | | | |
| 3) Change | | _ | | | | <u></u> | |
| Add | | | | | ٠ | | |
| Remove | | | | | | | |
| 4) Change | | _ | | | | <u> </u> | |
| Add | | | | | | | |
| Remove | | | | | | | |
| 5) Change | | | | | | | |
| Add | | | | | | - | |
| Remove | | | | | • | | |
| Koniove | | | | | | | |
| 6) Change | | | | | | _ | |
| Add | | | | | | | |
| Remove | | | | | | | |

| Attach additional sheets, if necessary). | (Be specific) |
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| an amendment provides for an exchorovisions for implementing the amer (if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
| an amendment provides for an exchorovisions for implementing the amer (if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
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| f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |

| The date of each amendment(s) adoption: | | , if other than the |
|--|---|---------------------------|
| date this document was signed. | | |
| September 23, 20 Effective date if applicable: | 10 | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not document's effective date on the Department of S | t meet the applicable statutory filing requirements, this date state's records. | will not be listed as the |
| Adoption of Amendment(s) (CHE | CCK ONE) | |
| The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap | hareholders. The number of votes cast for the amendment(s) proval. | |
| | shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s): | |
| "The number of votes cast for the amend | lment(s) was/were sufficient for approval | |
| by | " | |
| (votin | ng group) | • |
| action was not required. | oard of directors without shareholder action and shareholder | |
| action was not required. | · | • |
| Dated Mara Smy | der 9-30-16 | • |
| (By a director, presid | ent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary) | · . |
| David Snyder | r | |
| (T | 'yped or printed name of person signing) | |
| President | | |
| | (Title of person signing) | • |