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COVER LETTER

TO: Amendment Section ' Division of Corporations

NAME OF CORPOR	RATION:	Brien Johnston Irrigation	Inc.
DOCUMENT NUME	BER:	P11000056885	
The enclosed Articles	of Amendment and fee	are submitted for filing.	
Please return all corres	spondence concerning th	is matter to the following:	·
		Brien Johnston	
	1	Name of Contact Person	
	Brien	Johnston Irrigation Inc.	
		Firm/ Company	
	8413 \$	Southwood Pines Street	
		Address	
		Lithia, FI 33547	
	(City/ State and Zip Code	
	kelly_jo E-mail address: (to be use	@simscrane.com ed for future annual report notification)	
For further information	n concerning this matter,	, please call:	
Brie	n Johnston	at (<u>813</u>) 7	32-8400
Name of C	Contact Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for	r the following amount r	nade payable to the Florida Depar	tment of State:
☑ \$35 Filing Fec	\$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 Addre		Street Address	
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circ	le

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ton Irrigation Inc.		
ntly filed with the Florida	a Dept. of State)	
00056885		
	own)	
, Florida Statutes, this <i>Fl</i>	lorida Profit Corporation adopts the following	llowing
the corporation:		
	4 pr.	
designation "Corp," "Inc essional association," or icable: "ADDRESS")	the abbreviation "P.A."	
gistered office address in ered office address:	n Florida, enter the name of the	
		
(Florida street a	address)	
	, Florida	
(City)	(Zip Code)	
	patly filed with the Florida 100056885 Deer of Corporation (if known for the corporation) of the corporation of the corporatio	the corporation (if known) Florida Statutes, this Florida Profit Corporation adopts the form the corporation: The new ord "corporation," "company," or "incorporation adopts the form the word "corporation," "resignation "Corp." "Inc," or "Co". A professional corporation association," or the abbreviation "P.A." Cable: (ADDRESS) gistered office address in Florida, enter the name of the ered office address: (Florida street address)

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>	Name	Address	Type of Action		
<u>D</u>	Brien Johnston	8413 Southwood Pines Street Lithia, FI 33547	☑ Add □ Remove		
			☐ Add ☐ Remove		
			☐ Add ☐ Remove		
(attach addit	ional sheets, if necessary). (Be specific				
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)					

The date of each amendment(s) adoption: 7/27/11				
•	(date of adoption is required)			
Effective date if applicable:	1 00 1 6 1 (2)			
(1)	o more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.			
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):			
"The number of votes cas	t for the amendment(s) was/were sufficient for approval			
by				
(ve	oting group)			
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder			
Dated	7/27/11 3 1			
Signature	3-1+			
(By a c selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)			
_	Brien Johnston			
	(Typed or printed name of person signing)			
	Director			
	(Title of person signing)			