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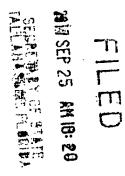
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I ALBRITTON

## COVER LETTER

TO: Amendment Section

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Division of Corporations Thipping Containers, Inc The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & \$43.75 Filing Fee & □ \$35 Filing Fee \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment to Articles of Incorporation

of

Shipping	Con	fainers. In	L		
orporation as curre	ntly fil	ed with the Florida I	Dept. of State	<u>5)</u>	
812000	80	1765			
06. Florida Statutes, th	is <i>Flor</i>	ida Profit Corporatio	n adopts the	following amo	endment(s) to
of the corporation:					
Coro				The	new
on "Corp," "Inc." oi	" "Co"	A professional cor	orporated" o poration nam	r the abbrev	riation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			<del></del>		<u>l</u> 3139
	_	(SAI	ME AS	CULLEN	T.)
<u>ble:</u> <u>FICE BOX</u> )	_	1521 Al	to Rd	# 7	31
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		in Florida, enter the	name of the		
<b>^</b>		Mason	(Sam	e Nam	e)
(Florida	street a	ddress)			
			Florida_		
	(City	)		(Zip Code)	
				200	<b>3</b> 2
<mark>iging Registered Age</mark> d agent. I am familia	nt: ir with	and accept the obliva	tions of the p	osition.	S -
			····· ·· · · · · · · · · · · · · · · ·	2-2	FIL SEP 25
Signature of New	v Regis	tered Agent if changi	na	150	
signature of iver	r negis	ъстъи глдени, и спанди	"δ	99 G	
	(Document Number Document Document Number Document Number Document Number Document Number Document Number Document Number Document Number Document Documen	(City Leging Registered Agent: dagent. I am familiar with a gent in Color of the corporation.)	(City)  Corporation as currently filed with the Florida I Pland Statutes (Document Number of Corporation (if known)  (If known)  (If known)  (If known)  (If known)  (If corporation (if known)  (If corporation (if known)  (If known)  (If known)  (If corporation (if known)  (If known)  (If known)  (If known)  (If known)  (If corporation (if known)  (If known)  (If known)  (If known)  (If corporation (If known)  (If known)  (If known)  (If known)  (If corporation (If known)  (If known)  (If known)  (If known)  (If corporation (If known)  (If known)  (If known)  (If known)  (If corporation (If known)  (If known)  (If known)  (If known)  (If corporation (If known)  (	(Document Number of Corporation (if known)  2. (Document Number of Corporation (if known)  3. (Document Number of Corpo	Corporation as currently filed with the Florida Dept, of State)  P 20008

## 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 Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				<del></del>
3) Change				
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4) Change				. <u>.</u> .
Add				
Remove				
5) Change			<del></del>	
Add				
Remove			<del></del>	
6) Change				
Add				
Remove				

Attach <i>ad</i>	ing or adding additions ditional sheets, if necess	sary). (Be specifi	ic)			
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f an ame	ndment provides for a	n exchange, reclas	ssification, or ca	ncellation of issi	ued shares,	
<u>provisio</u> i	ns for implementing the ot applicable, indicate N	<u>e amendment if no</u>	ot contained in t	<u>he amendment i</u>	tself:	
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The date of each amendment(s) adoption: $9-27-12$ , if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 Masun Builders Corp
☐ 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 9-22-17
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)
(Typed or printed name of person signing)
Prosider L (Title of person signing)