P1300041840

(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:				

Office Use Only



100320364351

11/06/16--01008--023 **52.50

2018 NOV - 6 AM 11: 36

C. GOLDEN NOV 1 3 2018

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: L Gray Corp DOCUMENT NUMBER: P13000041840 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Andrew Baehnman Name of Contact Person Baehnman LLC Firm/ Company 728 Churchill St Address Waupaca, WI 54981 City/ State and Zip Code andy@baehnmanllc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (920) 279-2105
Area Code & Daytime Telephone Number Andrew Bachman Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 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 Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 NOV -6 AM 11: 36

L Gray Corp

	P130000	¥1840	ALLAHASSEE, FL
	(Document Number of	Corporation (if known)	
tursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation	adopts the following amendment(s) to
. If amending name, enter the new na	me of the corporation:		
inovative Industrial Staffing Inc			The new
ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	Co". A professional corpo	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		N/A	
C. Enter new mailing address, if applicable: (Muiling address <u>MAY BE A POST OFFICE BOX</u>)		PO Box 26	
		New London, WI 54961-0026	
If amending the registered agent an new registered agent and/or the new			anse of the
Name of New Registered Agent	InCorp Services, Inc.		
name of their neglinered rigeri	17888 67th Court North		
	(Florida stre	et address)	
New Registered Office Address:	Loxahatchee		Florida 33470 (Zip Code)
	((City)	(Zip Code)
ew Registered Agent's Signature, if a hereby accept the appointment as regist			ons of the position
	^		on behalf of InCorp Services
	Signature of New Ro	egistered Agent, if changing	g

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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u> </u>	Lance Gray	449 Ash St
Add			Manawa, WI 54949
X Remove			
2) Change	P	Jacob Lindsay	116 Windmere Dr
X Add			Chattanoga, TN 37411
Remove			
3) Change	VP 	Tara Pachan	401 High St
X Add			Manawa, W1 54949
Remove			
4) Change	CFO	Lindsay Wegner	N3341 Ebert Rd
$\frac{X}{Add}$			New London, WI 54961
Remove			
5) Change	S	Zane Bratt	E6403 County Rd N
X Add			Manawa, W1 54949
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
N/A	(- 18 - 1 9 - 1
F. If an amendment provides for an exch	range, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
	· · · · · · · · · · · · · · · · · · ·
	·

. September 18, 2018	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n document's effective date on the Department of State's records.	ot be listed as the
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	
(voting group)	
☐ 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 10/31/2018	
Signature <u>Signature</u> (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)	
Lindsay Meaner (Typed or printed name of person signing)	
C.F.C.	
(Title of person signing)	