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And

NOV 04 2013 R. WHITE ECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

The enclosed Articles of Amendment and for are submitted for filing						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
SHERI HORNE						
Name of Contact Person						
BSI CONTRACTOR SERVICES						
Firm/ Company						
. 36 ARLINGTON ROAD SOUTH						
Address						
JACKSONVILLE, FL 32216						
City/ State and Zip Code						
SHERI@BSICONTRACTORSERVICES.COM						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
MATTHEW TAYLOR at (904) 509-1060						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
□ \$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) (Additional Copy is enclosed)						
Mailing Address Street Address						
Amendment Section Amendment Section						

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILFD

13 OCT 29 PM 1:03

SPACELIFT CONTRACTING, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) P13000079078 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, 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 <math>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:	ve, una sany s	mm, or as an Add.	
X Change	<u>PT</u> Jo	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	·
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	BRIAN ALDRIDGE	404 OWEN ALDRIDGE RD.
X Add	-		FOLKSTON, GA 31537
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Demove			

tach additiona	adding additional A al sheets, if necessar	y). (Be speci	fic)			
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	- Walife James		· · · · · · · · · · · · · · · · · · ·			
<u>ovisions for i</u>	t provides for an ex mplementing the a	mendment if n	ssification, or ot contained in	cancellation of	issued shares, ent itself:	
(if not appli	icable, indicate N/A)	•				
						
	-					
			 .			
<u> </u>						
		· <u>······</u> ···				

The date of each amendment(s) adoption: 10/04/13					
Effective date if applicable					
	(ho more than 90 days after amendment file date)				
Adoption of Amendment(s) (<u>CHECK ONE</u>)				
The amendment(s) was/by the shareholders was	were adopted by the shareholders. The number of votes cast for the amendment(s) /were sufficient for approval.				
☐ The amendment(s) was/v must be separately prov	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):				
"The number of vo	stes cast for the amendment(s) was/were sufficient for approval				
by	(voting group)				
☐ The amendment(s) was/vaction was not required.	were adopted by the board of directors without shareholder action and shareholder				
The amendment(s) was/vaction was not required.	were adopted by the incorporators without shareholder action and shareholder				
DatedSignature	Mauhen & Van or				
-	(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)				
	MATTHEW A. TAYLOR				
	(Typed or printed name of person signing)				
	(Title of person signing)				