P14000062451

| (Re | questor's Name) | | | |
|---|-------------------|-------------|--|--|
| (Ad | dress) | | | |
| (Ad | dress) | | | |
| (Cit | ry/State/Zip/Phon | e #) | | |
| PICK-UP | MAIT WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Do | cument Number) | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only





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No 85/9,

COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| NAME OF CORPORATION: HAZEN Grooving + Grinding, INC DOCUMENT NUMBER: P140006245/ |
| DOCUMENT NUMBER: P 140006245/ |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Robert Rance Name of Contact Person Hazen Grooving & Grinding, INC. |
| Name of Contact Person |
| Homen Granving & Crinding Take |
| Firm/Company |
| 220 Sorrento Ct |
| Address |
| Punta Gorda, FC 33950 City/State and Zip Code |
| City/ State and Zip Code |
| RRance Phazengg. Com E-mail address: (to be used for future annual toport notification) |
| E-mail address: (to be used for future annual teport notification) |
| |
| For further information concerning this matter, please call: |
| Robert Rance at (863, 244-8814 |
| Name of Contact Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount made pay the Florida Department of State: |
| \$35 Filing Fee \$35 Filing Fee & \$52.50 Filing Fee |
| Certificate of Status Cellified Copy Certificate of Status |
| (Additional copy is Certified Copy |
| enclosed) (Additional Copy |

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment

to

Articles of Incorporation

of

| Hazen Grooving & Grinding | | | |
|--|-------------------|----------------|---------|
| (Name of Corporation as currently filed with the Florida Dept. of State) | , | | |
| P14000062451 | | | |
| (Document Number of Corporation (if known) | | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation: | ollowing a | mendr | nent(s) |
| A. If amending name, enter the new name of the corporation: | | | • |
| Hazen Grooving & Grinding, I | DC. T | ha ni | 2140 |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name word "chartered," "professional association," or the abbreviation "P.A." | the abbi | reviatio | on |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | | |
| | | | • |
| | | 235 | - |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 22 | 30 | -1-1 |
| | SS | 12 | |
| | - 21-4 | - 0 | ببا - |
| | ,*** | PH 2: | . O |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the | 95 | -E- | |
| new registered agent and/or the new registered office address: | 07877 | | |
| Name of New Registered Agent | | | |
| | | | |
| (Florida street address) | | | |
| New Registered Office Address: , Florida | | | |
| (City) | (Zip Coo | te) | • |
| 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 pos | sition. | | |
| 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 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 | <u>nes</u> | |
| X Add | <u>sv</u> | Saily Sr | <u>mith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) Change | | ·· - | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | | | |
| Add | | _ | | |
| Remove | | | | |
| 3) Change | | | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 4) Change | | ·- | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | • | _ | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | - | _ | | |
| Add | | | | |
| Remove | | | | |

| | If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | | | | |
|-------------------------------|--|---------------------------------------|---|---------------------------------------|----------------|
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| <u>r an amen</u> provision | ndment provides for an e is for implementing the a | mendment if not cont | ton, or cancellation tained in the amendr | of issued shares, nent itself: | |
| PERT ISIUIT | t applicable, indicate N/A |) | | | |
| (if not | | | | | |
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| The date of each amendment(s) adoption: | , if other than the |
|--|---------------------------|
| date this document was signed. | |
| 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 document's effective date on the Department of State's records. | will not 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): | t |
| "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 10/19/16/ Signature Father Conco | |
| Signature Faller Vance | |
| (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) | |
| Robert Rance (Typed or printed name of person signing) | |
| (Typed or printed name of person signing) | |
| (Title of person signing) | |
| (Title of person signing) | |