P18000057038

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	<u></u>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500317858555

09/06/18--01015--004 **35.00



COVER LETTER

Ì

Tallahassee, FL 32301

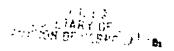
TO: Amendment Section Division of Corporations

2811 SEP - 6 AH 11: 45

NAME OF CORPORATION:	Billingsl	ea Incorporated	
DOCUMENT NUMBER:	P1800005703	8	
The enclosed Articles of Amend	ment and fee are sul	bmitted for filing.	
Please return all correspondence	concerning this mat	ter to the following:	
		Sonia Bece	rra
		Name of Contact Pers	son
		Swyft Filing	js –
		Firm/ Company	
	126	605 East Freeway	/ Suite 540
		Address	
		Houston, Texas	77015
		City/ State and Zip Co	ode
	fil	ings@swyftfilings	.com
E-ma	nil address: (to be us	ed for future annual repo	ort notification)
For further information concerni	ng this matter, pleas	e call:	
Sonia Becerra	l,	at (877) 777-0450
Name of Contact	Person	Area (Code & Daytime Telephone Number
Enclosed is a check for the follow	wing amount made p	payable to the Florida De	partment of State:
7 \	3.75 Filing Fee & rtificate 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 Address			et Address
Amendment So Division of Co			ndment Section sion of Corporations
P.O. Box 6327	,		on Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Articles of Amendment to

Articles of Incorporation of



Billingslea Incorporated

to

(Name of Corporation as currently to P1800005 (Document Number of Cursuant to the provisions of section 607.1006, Florida Statutes, this Flas Articles of Incorporation:	
(Document Number of Coursuant to the provisions of section 607.1006, Florida Statutes, this FI	57038
Fursuant to the provisions of section 607.1006, Florida Statutes, this Fl	
	Corporation (if known)
	Torida Profit Corporation adopts the following amendment
. If amending name, enter the new name of the corporation:	
ame must be distinguishable and contain the word "corporation," Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Covord "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
8. Enter new principal office address, if applicable:	4312 Ellipse Drive
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Jacksonville, FL 32246
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4312 Ellipse Drive
	Jacksonville, FL 32246
If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
Nume of New Registered Agent	
	(address)
New Registered Office Address:	. Florida

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>	<u>John Doe</u>	
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) X Change	<u>P</u>	Roderick Billingslea Sr	4312 Ellipse Drive
Add			Jacksonville, FL 32246
Remove			
2) X Change	T	Roderick Billingslea Sr	4312 Ellipse Drive
Add			Jacksonville, FL 32246
Remove			
3) X Change	S	Roderick Billingslea Sr	4312 Ellipse Drive
Add			Jacksonville, FL 32246
Remove			
4) X Change	D	Roderick Billingslea Jr	4312 Ellipse Drive
Add			Jacksonville, FL 32246
Remove			•
5) Change			
A dd			
Remove			
6) Change		_	
Add			
Remove			

	icles, enter change(s) here: (Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, matcate WA)	

	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 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
	(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.
	Dated8-27-18
	Dated
	(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)
	Roderick Billing Slea Sr. (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)

the