

P93000005271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

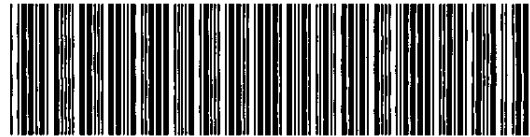
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/01/12--01028--006 **43.75

12 NOV -5 PM 12:30
10:11:50

Name Change
11-6-12
Dc



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 9, 2012

S. PERRY PENLAND, JR., ESQUIRE
S. PERRY PENLAND, JR., P.A.
233 EAST BAY STREET #610
JACKSONVILLE, FL 32202

SUBJECT: FOUNDATION SYSTEMS AND EQUIPMENT COMPANY
Ref. Number: P93000005271

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE CURRENT CORPORATE NAME MUST BE IN THE HEADING OF THE DOCUMENT.

The date of adoption of each amendment must be included in the document.

The amendment must be adopted in one of the following manners:

(1) If an amendment was approved by the shareholders, one of the following statements must be contained in the document.

(a) A statement that the number of votes cast for the amendment by the shareholders was sufficient for approval, -or-

(b) If more than one voting group was entitled to vote on the amendment, a statement designating each voting group entitled to vote separately on the amendment and a statement that the number of votes cast for the amendment by the shareholders in each voting group was sufficient for approval by that voting group.

(2) If an amendment was adopted by the incorporators or board of directors without shareholder action.

(a) A statement that the amendment was adopted by either the incorporators or board of directors and that shareholder action was not required.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist II

Letter Number: 612A00024949

S. PERRY PENLAND, JR., P.A.

ATTORNEY AND COUNSELOR AT LAW
e-mail: sppjr1@bellsouth.net

JACKSONVILLE OFFICE
TELEPHONE: (904) 634-0501
FACSIMILE: (904) 634-0606
TOLL FREE: 1-866-634-0100

610 BLACKSTONE BUILDING
233 EAST BAY STREET
JACKSONVILLE, FL 32202
REPLY TO JACKSONVILLE

FERNANDINA BEACH OFFICE
TELEPHONE: (904) 277-8227

26 SOUTH 5TH STREET
FERNANDINA BEACH, FL 32034
WWW.PENLANDLAW.COM

October 31, 2012

AMENDMENT SECTION
DIVISION OF CORPORATIONS
P O BOX 6327
TALLAHASSEE FL 32314

Re: Articles of Amendment for
Foundation Systems and Equipment Company
Reference Number: P93000005271

Dear Sirs:

Enclosed is the original and one copy of the Articles of Amendment to Articles of Incorporation of Foundation Systems and Equipment Company together with our Cover Letter. We have previously sent our firm's check in the amount of \$43.75 which we understand you are holding pending receipt of the Articles of Amendment on the correct form.

We would appreciate your filing these Articles of Amendment and returning a certified copy. If you have any questions or need additional information, do not hesitate to call. Thank you very much. I remain,

Yours very truly,


S. PERRY PENLAND, JR.

SPPJR:llk
Enclosures

RECEIVED
12 NOV -5 AM 8:26
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Foundation Systems and Equipment Company

DOCUMENT NUMBER: P93000005271

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

S. Perry Penland, Jr., Esquire

Name of Contact Person

S. Perry Penland, Jr., P.A.

Firm/ Company

633 East Bay Street #610

Address

Jacksonville, FL 32202

City/ State and Zip Code

sppjr1@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

S. Perry Penland, Jr.

Name of Contact Person

at (904)

634-0501

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate 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

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

Articles of Amendment
to
Articles of Incorporation
of

Foundation Systems and Equipment Company

(Name of Corporation as currently filed with the Florida Dept. of State)

P93000005271

(Document Number of Corporation (if known))

FILED
12 NOV -5 PM 12:30
CLERK OF COURT
JACKSONVILLE, FLORIDA

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:

Foundation Systems, Inc.

The new 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)

n/a

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

n/a

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 n/a

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

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 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

n/a

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

n/a

The date of each amendment(s) adoption: 10-18-12

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 10-22-12

Signature Billy C. McMahon
(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)

BILLY C. McMAHAN
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)