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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HARPER F	RENTALS, INC.	
DOCUMENT NUMBER: P9700004935		
The enclosed Articles of Amendment and fee are su	abmitted for filing.	
Please return all correspondence concerning this ma	itter to the following:	
KATHRYN V. RC	OSS, CPA	
	Name of Contact Persor	1
KATHRYN V. RC	OSS, CPA, P.A.	
	Firm/ Company	
3823 N. ECONLO	OCKHATCHEE T	TRL, STE. D-5
	Address	<u> </u>
ORLANDO, FL 3	2817	
	City/ State and Zip Code	2
adminassist@iag.ne	t	
	sed for future annual report	notification)
For further information concerning this matter, plea	se cali:	
Kathryn V. Ross	_{at (} 407	, 673-1300
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$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	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

14 DEC 29 PH 12: 58

HARPER RENTALS, INC.

, SERRETARE OF STATES TALLAMASSEE, FLORIDA

(Document Number of Corporation (if I	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F is Articles of Incorporation:	Iorida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name 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
3. 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: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address: (City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	ith and accept the obligations of the position.

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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	JAMES R. HARPER	113 LAGOON CT.
Add			NEW SMYRNA BEACH,
Remove			FL 32169
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 Artic Attach additional sheets, if necessary).	(Be specific)
	
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	·
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(y noi applicable, malcale IVA)	

ine date of each amendment(s) at	option:	, ii other than
date this document was signed.		
Effective date <u>if applicable</u> :		_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	•
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	12/12/2014	
Signature	elso At thay	
	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	,
	ted fiduciary by that fiduciary)	
	THOMAS H. HARPER	
	(Typed or printed name of person signing)	_
	SECRETARY	
	(Title of person signing)	