P99000092422

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
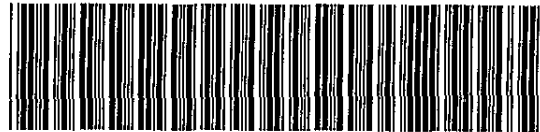(Business Entity Name)

_____
(Document Number)

Certified Copies ✓_____   Certificates of Status _____

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08/26/05--01014--019   **43.75

Amend.
JB
8/29

COVER LETTER

TO: Amendment Section
    Division of Corporations

NAME OF CORPORATION: <u>J.A.M. SMITH, INC.</u>

DOCUMENT NUMBER: <u>P99000092422</u>

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

Please return all correspondence concerning this matter to the following:

<u>James M. Smith</u>
(Name of Contact Person)

<u>J.A.M. SMITH, INC.</u>
(Firm/ Company)

<u>7345 International Place, Suite 108</u>
(Address)

<u>Sarasota, FL 34240</u>
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

<u>James M. Smith</u> at (<u>941</u>) <u>907-2017</u>
(Name of Contact Person)   (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ $35 Filing Fee   ☐ $43.75 Filing Fee &   ☒ $43.75 Filing Fee &   ☐ $52.50 Filing Fee
               Certificate of Status   Certified Copy   Certificate of Status
                                (Additional copy is   *Certified Copy*
                                enclosed)   *(Additional Copy*
                                                           is enclosed)

Mailing Address   **Street Address**
Amendment Section   Amendment Section
Division of Corporations   Division of Corporations
P.O. Box 6327   409 E. Gaines Street
Tallahassee, FL 32314   Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

J.A.M. SMITH, INC.

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

P99000092422

(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:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

Please change the principal address and registered agrent

address to:

6150 State Road 70 East

Bradenton, FL 34203

Please add Martin T. Koellhoffer, 6150 State Road East,

Bradenton, FL 34203, Vice President and Director

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: _____ August 9, 2005 _____

Effective date if applicable: _____ August 9, 2005 _
<div align="center">(no more than 90 days after amendment file date)</div>

Adoption of Amendment(s)   **(CHECK ONE)**

☒ The amendment(s) was/were approved 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
<div align="center">   "
_____
(voting group)</div>

☐ 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.

Signed this _22nd_ day of _August, 2005_.

Signature _____ PRES.
<div align="center">(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)</div>

_____
<div align="center">(Typed or printed name of person signing)
James M. Smith</div>

_____ President _____
<div align="center">(Title of person signing)</div>

<div align="center">**FILING FEE: $35**</div>