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JUL 20 2017

R. Wales

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	RATION: LUCAS TI-CO-			
DOCUMENT NUN				
	s of Amendment and fee are su	bmitted for filin	តិ-	
Please return all corr	espondence concerning this ma	tter to the follow	ving:	
	ROBERT A. LUCAS			
		Name of Co	ntact Person	7
	LUCAS T I CO			
		Firm/ C	ompany	
	314 RIO PINAR DRIVE			
		Add	ress	
	ORMOND BEACH, FLORI	DA 32174		
	-	City/ State as	nd Zip Cod	
luca	stiob(ழ்воl.com			
	E-mail address: (to be us	ed for future an	nual report	notification)
For further informati Robert A. Lucas	on concerning this matter, pleas		386	671 0069
Name	of Contact Person	at (_	Area Co	de & Daytime Telephone Number
	or the following amount made			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fili Certified C (Additional enclosed)	ору	□\$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 Amendmem Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

17 " - Er - 100 - De

LUCAS TTCO .
(Name of Corporation as currently filed with the Florida Dept. of State)
V07722
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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)
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 in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	v	STEVEN R. LUCAS	4417 GRAY FOX ROAD
Add			FORT COLLINS, COLORADO 86 52
X Remove			
2) X Change	VT	JEFFREY A. LUCAS	13 FERNERY TRAIL
Add			ORMOND BEACH, FLORIDA 32/77
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

Attach addition	r adding additional Artic nal sheets, if necessary).	(Be specific)	<u></u>		
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lf an amendn	ent provides for an excha	inge, reclassificati	on, or cancellation	of issued shares,	
	r implementing the amen	dment if not conta	ined in the amend	<u>lment itself:</u>	
(if not ap	plicable, indicate N/A)				
• • • • • • • • • • • • • • • • • • • •					
					
	•			<u>.</u>	<u>.</u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed. JULY 13, 2017 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, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	pent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust 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	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharel action was not required.	holder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholde action was not required.	ег
Dated Rhet A Lucas	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
ROBERT A. LUCAS	
(Typed or printed name of person signing)	
(Title of person signing)	