

V55052

(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:

2010 MAY 13 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05/20/10--01004--014 **35.00

FILED

2010 MAY 20 P 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Amend
Thurs
5-20-10*

Certified Calibrations Inc.
565 Frederica Lane, Suite B
Dunedin, FL 34698
(727) 733-0093 / fax (727) 734-9137

May 16, 2010

Ms. Thelma Lewis
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Ms. Lewis,

Per our phone conversation on May 14th, please find enclosed check # 3576 in the amount of \$35.00.
Please void the check you have and return it to me.

Thank you for your assistance. Please contact me if you need additional information.

Thank you,



Jennifer L. Reed
Vice President/Secretary

Enc/jlr

*P.S. This is in re: Certified Calibrations, Inc.
Doc. # V55052*

Certified Calibrations Inc.
565 Frederica Lane, Suite B
Dunedin, FL 34698
(727) 733-0093 / fax (727) 734-9137

May 8, 2010

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

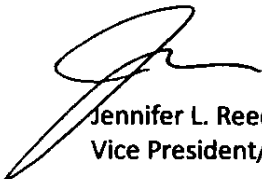
Dear Amendment Section:

Please find attached:

1. Articles of Amendment to Articles of Incorporation of Certified Calibrations Inc.
 2. ~~Statement of Change of Registered office or Registered Agent or Both for Corp.~~
 3. ~~Resignation of Registered Agent for a Corp.~~
 4. ~~Officer/Director Resignation for a Corp. (Louise Weed)~~
 5. ~~Officer/Director Resignation for a Corp. (Don W. Weed)~~
 6. Minutes of the Special Meeting (Elect Jennifer L. Reed as VP)
 7. Minutes of the Special Meeting (Stock Transfer, Resignation of Don W. Weed, Elect Michael L. Reed as President)
 8. Minutes of the Special Meeting (Elect Jennifer L. Reed as Secretary)
 9. Minutes of the Special Meeting (Resignation of Louise Weed as VP)
 10. Payment for all above items - CHECK # 3574 - \$ 227.50.
- Returned Change in the Amendment*

Please contact me at your earliest opportunity if you need additional information.

Thank you,


Jennifer L. Reed
Vice President/Secretary

Enc/jlr

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CERTIFIED CALIBRATIONS INC.

DOCUMENT NUMBER: V55052

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

Please return all correspondence concerning this matter to the following:

MICHAEL L. REED

Name of Contact Person

CERTIFIED CALIBRATIONS INC.

Firm/ Company

565 FREDERICA LN., SUITE B

Address

DUNEDIN, FL 34698

City/ State and Zip Code

michaelreed@ij.net

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

For further information concerning this matter, please call:

MICHAEL L. REED

Name of Contact Person

at (727)

733-2266-0093
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

CERTIFIED CALIBRATIONS INC.

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

V55052

(Document Number of Corporation (if known))

FILED

2010 MAY 20 P 1:59

SECRETARY OF STATE
TALLAHASSEE, 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:

N/A

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:

N/A

(Principal office address **MUST BE A STREET ADDRESS**)

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:

JENNIFER L. REED

New Registered Office Address:

~~4340 HALES HOLLOW DR.~~

(Florida street address)

565 FREDERICA LN.
SUITE B

DUNEDIN

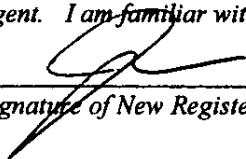
(City)

, Florida 34698

(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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRES.</u>	<u>DON W. WEED</u>	<u>647 HIGHLAND AVE.</u> <u>DUNEDIN, FL 34698</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VPS</u>	<u>LOUISE WEED</u>	<u>647 HIGHLAND AVE.</u> <u>DUNEDIN, FL 34698</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>MICHAEL L. REED</u>	<u>1340 HALES HOLLOW DR.</u> <u>DUNEDIN, FL 34698</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

SEE ADDITIONAL PAGE

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific) ~~N/A~~

TRANSFER SHARES FROM SHAREHOLDERS, DON W.
WEED AND LOUISE WEED, AS JOINT TENANTS
TO MICHAEL L. REED AND JENNIFER L.
REED AS JOINT TENANTS IN THE AMOUNT
OF ONE MILLION SHARES (1,000,000)
CERTIFICATE NO. 1.

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)

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRES.</u>	<u>MICHAEL L. REED</u>	<u>1340 HALES HOLLOW DR.</u> <u>DUNEDIN, FL 34698</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VPS</u>	<u>JENNIFER L. REED</u>	<u>1340 HALES HOLLOW DR.</u> <u>DUNEDIN, FL 34698</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>_____</u>	<u>_____</u>	<u>_____</u>	<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)

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)

The date of each amendment(s) adoption: ~~MAY 3, 2010~~ MAY 1, 2010
(date of adoption is required)

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 ~~MAY 3, 2010~~ MAY 1, 2010

Signature _____

(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)

DON W. WEED

(Typed or printed name of person signing)

PRES.

(Title of person signing)