

Mailing Address: PO Box 9431 Stn Prov Govt Victoria BC V8W 9V3 Location:

DISSOLUTION OR CHANGE OF PARTNERSHIP OR

Ministry PROPRIETORSHIP REGISTRATION The Best Place on Earth of Finance 2nd Floor - 940 Blanshard Street **BC** Registry Services Victoria BC Phone: 250 356-2893 or 604 775-1044 (Greater Vancouver only) NAME APPROVAL NO. - If applicable NR FILED AND REGISTERED A. Name and Return Mailing Address for this Document FEB 2 3 2010 2800 PARK PLACE, 666 BURRARD STREET REGISTRAR OF COMPANIES PROVINCE/ PROVINCE/ POSTAL CODE VANCOUVER, BC V6C 2Z7 Note: The registration of a business name under the Partnership Act does not provide any protection for that name. Instructions: Sections A and B must be completed by all. Sections C to H: Complete only the sections where a change is required. Please TYPE or PRINT CLEARLY. Press firmly - you are making three copies. Registration Number B. Registered Business Name - Enter current name, not new name of business LEAVITT MACHINERY GENERAL PARTNERSHIP 0415669-06 C. Date of Dissolution of Partnership or Proprietorship D. Change in Nature of Business Complete only if you want to dissolve the business E. Change of Business Name - Enter new business name (a name reservation is required prior to submitting the change) F. Change of Address(es) a) BUSINESS ADDRESS IN BRITISH COLUMBIA - Must be the physical location of the business, not just a general delivery, post office box, rural route, site, or comp. number b) MAILING ADDRESS c) RESIDENTIAL OR REGISTERED ADDRESS - Must be a physical location, if this is a change to a partnership, please indicate the name of the partner 1000, 250 - 2ND STREET SW, CALGARY, AB T2P 0C1 G. Name and Signature of proprietor/partner for changes made to Sections C, D, E, or F PROPRIETOR/PARTNER NAME - State corporate or individual name in full (last name, first name & middle initial) SIGNATURE X H. Change in Membership of a Partnership Only - We hereby certify that the persons named in Section H are the only members this partnership. (Attach additional sheets if necessary.)

PARTNER NAME - State corporate or individual name in full (last name, first name & middle initial).

SIGNATURE H. Change in Membership of a Partnership Only -INTERIOR LIFT TRUCK SERVICES INC. X RESIDENTIAL OR REGISTERED ADDRESS - Must be a physical location, CANNOT be just a general delivery, post office box, rural route, site, or comp. number 1000, 250 - 2ND STREET SW, CALGARY, AB T2P 0C1 PARTNER NAME - State corporate or individual name in full (last name, first name & middle initial) SIGNATURE

LEAVITT MACHINERY AND RENTALS INC.

RESIDENTIAL OR REGISTERED ADDRESS - Must be a physical location, CANNOT be just a general delivery, post office box, rural route, site, or comp. number

1000, 250 - 2ND STREET SW, CALGARY, AB T2P 0C1

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FORWARD TWO COPIES TO THE REGISTRAR OF COMPANIES PLEASE MAKE A COPY FOR YOUR RECORDS



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