## P16000014369

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GOLFLINE CONS	STRUCTION SERVICES O	CORP
DOCUMENT NUMB	ER: P16000014369		
The enclosed Articles of	fAmendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
!	LADISLAO S LEDESMA		
<del>.</del>		Name of Contact Person	
(	GOLFLINE CONSTRUCTION	ON SERVICES CORP	
_		Firm/ Company	
:	27333 DORTCH AVE		
_		Address	
	BONITA SPRINGS FL 3413	35	
-		City/ State and Zip Code	
splince	ometax@hotmail.com		
<del></del>		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
LADISLAO S LEDES	MA	at ( <u>239</u>	331-0371
. Name o	f 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 & 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



GOLFLINE CONSTRUCTION SERVICES CORP

16 HAR 21 PM 1: 11

(Name of Corporation as current	tly filed with the Florida Dept. of State)
P16000014369	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: GULFLINE CONSTRUCTION OF SW CORP	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
(	
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 add new registered agent and/or the new registered office addres	lress in Florida, enter the name of the
Name of New Registered Agent N/A	
(Flacidation)	
	reet address)
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New 1	Registered Agent, if changing

a second				
If amending the Office address of each Office (Attach additional shee	r and/or I ts, if neces	Director being added: ssary)	and name of each officer/director being removed an	d title, name, and
P = President; V = Vice	e Presiden ) = Chief	Financial Officer. If an off	ffice title: tary; D= Director; TR= Trustee; C = Chairman or Co ficer/director holds more than one title, list the first le	lerk; CEO = Chief etter of each office
Changes should be note a change, Mike Jones l	ed in the fo	ollowing manner. Currently	For John Doe is listed as the PST and Mike Jones is listed named the V and S. These should be noted as John Doo	l as the V. There is e, PT as a Change,
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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change				<del></del>
Add				
Remove				
2) Change				
Add				
Remove				<del>.</del>
3) Change				<del>-</del>
Add				<del></del>
Remove				<del>-</del>
4) Change			<u> </u>	
Add				<del></del>
Remove				
5) Change				
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Remove				<u></u>
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f an amendment provid	les for an exchange, reclassificati	on, or cancellation of issue	l shares,
<u>provisions for impleme</u>	nting the amendment if not conta	on, or cancellation of issue ained in the amendment its	l shares, lf:
f an amendment provid provisions for impleme (if not applicable, in	nting the amendment if not conta	on, or cancellation of issued ained in the amendment itse	l shares, elf:
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<u>provisions for impleme</u>	nting the amendment if not conta	ion, or cancellation of issued ained in the amendment its	l shares,

· •	03/17/2016	
The date of each amendment(s) late this document was signed.	adoption:, if e	other than th
	3/17/2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the l	s block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	listed as t
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	1,5
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	2
by	<u>"</u>	5.61 · 1
<u> </u>	(voting group)	海
☐ The amendment(s) was/were a action was not required.	(voting group)  adopted by the board of directors without shareholder action and shareholder  adopted by the incorporators without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	THE STATE OF THE S
03/17/20 Dated	016	,
Signature	a director, president or other officer – if directors or officers have not been	
selec	cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	LADISLAO S LEDESMA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	