## 394623

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(Address)
(Address)
(City/State/Zip/Phone #)
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FILED
2024 AUG 14 PM 3: 29
SECRETARY OF STATE



## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Gulf-Atlantic Cons	tuctors, Inc.			
DOCUMENT NUMB	BER:				
	of Amendment and fee are sub	omitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	Pamela Hunt Caddell				
	Name of Contact Person				
	Gulf-Atlantic Constructors. Inc.				
	Firm/ Company				
	255 Kenmore Road				
	Address				
	Pensacola, FL 32503				
	City/ State and Zip Code				
	phcaddell@gmail.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e cali:			
Pamela Hunt Caddell		at (850	_) 516-2922		
Name of Contact Person		Area Coo	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made j	payable to the Florida Depa	ertment 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## **Articles of Amendment** Articles of Incorporation of

GULF-ATLLANTIC CONSTRUCTORS, INC.		FILED
(Name of Corporation	as currently filed with the Florida	Dept. of State)
394623		2024 AUG 14 PM 3: 2
(Documer Pursuant to the provisions of section 607.1006, Florida S	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this <i>Florida Profit Corporatio</i>	m adopts the following A জ নি বিদ্যুদ্ধ
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word "corp" "Inc.," or Co.," or the designation "Corp," "Inc," of "chartered," "professional association." or the abbrevio	or "Co". A professional corporation	ted" or the abbreviation "Corp.," on name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter the	e name of the
Name of New Registered Agent		
***		
	(Florida street address)	
New Registered Office Address:		, Florida
<del> </del>	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. It	stered Agent: am familiar with and accept the oblig	ations of the position.
Signati	ure of New Registered Agent, if chang	ing
Check if applicable  The amendment(s) is/are being filed pursuant to s. 60	07.0120 (11) (c), F.S.	

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	BENNY RADFORD	9915 AILERON AVE
Add			PENSACOLA, FL 32506
X Remove			
2) Change	\$/T	JILL RADFORD	9915 AILERON AVE
Add			PENSACOLA, FL 32506
X Remove 3) Change	VP	PHILLIP CADDELL	2538 ANGEL COURT
X Add	•		GULF BREEZE, FL 32563
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6)Change			_
Add			
Remove			

emoving Benny A	adding additional Arti al sheets, if necessary).	(Be specific)		
	and Jill Radford as office	ers due to downsizii	ng of company. A	dding Phillip Caddell as an offic
r administrative p	urposes.			
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			<del></del>	
. If an amendme	nt provides for an exchimplementing the ame licable, indicate N/A)	hange, reclassificat endment if not con	ion, or cancellations in the ame	on of issued shares. ndment itself:
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The date of each amendment(s) a	August 1, 2024	, if other than the
date this document was signed.	aoption	It office than the
Effective date if applicable:		
	(no more than 90 days after amendment	file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing recepartment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adeaction was not required.	opted by the incorporators, or board of directors witho	ut shareholder action and shareholder
The amendment(s) was/were ade by the shareholders was/were so	opted by the shareholders. The number of votes east fufficient for approval.	or the amendment(s)
	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the a	
"The number of votes cast	for the amendment(s) was/were sufficient for approva	al .
by		
	(voting group)	
Dated Signature	Try anele Aunt Caldell	
	irector, president or other officer – if directors or officed, by an incorporator – if in the hands of a receiver, true	
appoin	ted fiduciary by that fiduciary)	
	PAMELA HUNT CADDELL	
	(Typed or printed name of person signing	)
	PRESIDENT	
	(Title of person signing)	

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Gulf-Atlantic Cons	stuctors, Inc.	
DOCUMENT NUMBI			
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
F	Pamela Hunt Caddell		
_	<del></del>	Name of Contact Person	1
(	Sulf-Atlantic Constructors, In	nc.	
_		Firm/ Company	
2	55 Kenmore Road		
<del>-</del>		Address	
F	Pensacola, FL 32503		
_		City/ State and Zip Code	2
p	hcaddell@gmail.com		
_	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas		
Pamela Hunt Caddell		at ( <u>850</u>	
Name of Contact Person		Area Coo	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)
Amer Divis P.O. I	ng Address adment Section ion of Corporations Box 6327 nassec, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303