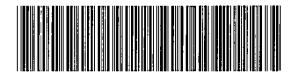
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE AUG 2 6 2025
Alle:
700 2 6 2025

Office Use Only



400452481564

2025 AT 25 AC 0: 37

2025 AUG 25 PH 4: 08



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date: 08	1/25/2025	
Name:	Delijah Showers	_
Reference #:	2874442	_
		TION, INC. OF KENTUCKY
☐ Articles o	of Incorporation/Authorization	to Transact Business
✓ Amendm	•	
Change	of Agent	
Reinstate	ement	
Conversi	on	
Merger		
☐ Dissolution	on/Withdrawal	
☐ Fictitious	Name	
Other		
Authorized Amo	ount:	5-00
Signature: Ve	ujun Indwera	

F: 800.944.6607



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues please contact Cheyanne at 850-202-1882

Date:	08/25/2025	
Name:	Delijah Showers	_
Reference #:_	2874442	_
Entity Name:_	GRAY CONSTRUCT	TION, INC. OF KENTUCKY
☐ Articles	of Incorporation/Authorization	to Transact Business
✓ Amend	ment	
☐ Change	e of Agent	
Reinsta	atement	
Conve	rsion	
☐ Merger		
☐ Dissolu	ution/Withdrawal	
Fictition	us Name	
Other_		
Authorized An	nount: \$26 35	<u>00_</u>
	Pelijah Showers	

COVER LETTER

SUBJECT:	Gray Cons	struction, Inc. of Kentuc	cky
		e of Corporation	
DOCUMENT NUME	BER:	851345	
The enclosed Amenda	nent and fee are submitted fo	r tiling.	
Please return all corres	spondence concerning this ma	atter to the following:	
	ERIN DUNCAN		
Ņ	ame of Contact Person		
	GRAY INC.		
	Firm/Company		
	10 QUALITY STREET		
	Address		
	LEXINGTON, KY 40507		
	City/State and Zip Code		
	LEGALNOTICES@GRAY	.СОМ	
E-mail address:	to be used for future annual	report notification)	
For further information	n concerning this matter, plea	ase call:	
ERI	N DUNCAN	859 at (281-5000
Name of	Contact Person	Area Code & D	aytime Telephone Number
Enclosed is a check fo	r the following amount:		
	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing F Certified Copy	Fee & \$52.50 Filing Fee. Certificate of Status of Certified Copy

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

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION 1 (1-3 MUST BE COMPLETED)

(Document number of corporation (if known) Gray Construction, Inc. of Kentucky (Name of corporation as it appears on the records of the Department of State) Kentucky (Incorporated under laws of) (Date authorized to do busing SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES) 4. If the amendment changes the name of the corporation, when was the change effected under the laws of its incorporation? (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting of the amendment changes the period of duration, indicate new period of duration.	2625 AL
(Name of corporation as it appears on the records of the Department of State) Kentucky (Incorporated under laws of) (Date authorized to do busing SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES) If the amendment changes the name of the corporation, when was the change effected under the laws of its incorporation? (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting the corporation of the corporation	
(Name of corporation as it appears on the records of the Department of State) Kentucky 3. 12/18/19/ (Incorporated under laws of) (Date authorized to do busing SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES) If the amendment changes the name of the corporation, when was the change effected under the laws of its incorporation? (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	
(Incorporated under laws of) SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES) If the amendment changes the name of the corporation, when was the change effected under the laws of its incorporation? (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	61 - 1 150 - 1
SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES) If the amendment changes the name of the corporation, when was the change effected under the laws of its incorporation? (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	÷ · ,
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	iness in Florida)
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	ထ
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	
not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	jurisdiction of
not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	
	appropriate abbreviation.
	e business in Florida)
. If the amendment changes the period of duration, indicate new period of duration.	<u> Lindinicio III i Initady</u>
	
(New duration)	
7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.	
(New jurisdiction)	
(con junication)	
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,	Zip Code)
(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	

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

P, CEO Brian Jones 10 Quality Street]Add
Lexington, KY 40507 	Remove
P. CEO J. Rebekah Gray 10 Quality Street	<u>]</u> Add
Lexington, KY 40507	Remove
	J Add
	Remove
] Add
□	Remove
	⊒Add
C	Remove
 Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than of the application to the Department of State, by the Secretary of State or other official having custody of corporate under the laws of which it is incorporated. 	n 90 days prior to deliver e records in the jurisdiction
(Signature of a director, president or other officer - if in the hands of	
a receiver or other court appointed fiduciary, by that fiduciary)	
J. Colby Cox CLO and Secretary (Typed or printed name of person signing) (Title of person signing)	<u>, , , , , , , , , , , , , , , , , , , </u>

FILING FEE \$35.00