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COVER LETTER

'TO: Amendment Section **Division of Corporations**

NAME OF CORF	PORATION:	Gravina, Smith & Matte, Inc.		
DOCUMENT NU	MBER:	J32209		
The enclosed Artic	les of Amendment and fee a	are submitted for filing.		
Please return all co	rrespondence concerning th	is matter to the following:		
		Eileen Tiedemann		
		Jame of Contact Person		
Gravina, Smith & Matte, Inc.				
Firm/ Company				
	1520 Royal Palm Square Blvd., Suite 160			
Address				
	Fort Myers, FL 33919 City/ State and Zip Code			
•				
	ETiedeman E-mail address: (to be use	n@GravinaSmith.com		
For further informa	ation concerning this matter,	please call:		
Ei	leen Tiedemann		<u>25-5758</u>	
Name	of Contact Person	Area Code & Daytime Tele	ephone Number	
Enclosed is a checl	k for the following amount n	nade payable to the Florida Depart	ment 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	e	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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	of		FILT
Gravina,	Smith & Matt	e, Inc.	10 MAY 14 PH 4:22
(Name of Corporation as cu	rrently filed with	the Florida Dept. o	of State) PH 4: 22
	J32209		TALLAND OF CE
(Document N	umber of Corporat	ion (if known)	MELLAGISSEE, FLORIDA
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation		es, this <i>Florida Pi</i>	
A. If amending name, enter the new name	of the corporatio	<u>n:</u>	
	N/A		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or i name must contain the word "chartered," "p	the designation "C	orp," "Inc," or "C	o". A professional corporation
B. Enter new principal office address, if a (Principal office address <u>MUST BE A STRI</u>		<u>N/A</u>	
C. Enter new mailing address, if applicat			
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX)	N/A	
D. If amending the registered agent and/o new registered agent and/or the new re Name of New Registered Agent:			a, enter the name of the
New Registered Office Address:	(Flor	ida street address)	
			, Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if chan	aging Registered A	gent	
I hereby accept the appointment as registered			ot the obligations of the position.
-	Cionatana of Nau	Registered Agent	ifahanaina

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)

Title.	<u>Name</u>	Address	Type of Action
VP	Melinda Isley	1520 Royal Palm Square Blvd. Suite 160 Fort Myers, FL 33919	☑ Add ☐ Remove
			☐ Add☐ ☐ Remove
			_
<u>provisi</u>	mendment provides for an exchange, ons for implementing the amendment not applicable, indicate N/A)	reclassification, or cancellation of is if not contained in the amendment	sued shares, itself:

The date of each amendmen	ıt(s) adoption: <u>C</u>	04/01/10
Effective date <u>if applicable</u> :		(date of adoption is required)
•	(no more than	90 days after amendment file date)
•		
Adoption of Amendment(s)	(<u>C</u>	HECK ONE)
The amendment(s) was/w by the shareholders was/w		ne shareholders. The number of votes cast for the amendment(s) r approval.
		the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the ame	endment(s) was/were sufficient for approval
by		,"
· · · · · · · · · · · · · · · · · · ·	(voting group)	.,,
action was not required.		ne board of directors without shareholder action and shareholder ne incorporators without shareholder action and shareholder
·	<u>5-11-</u>	el Amith
Signature	Laur	el Amith
(B se	y a director, pres lected, by an inco	or other officer – if directors or officers have not been or porporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		Laurel Smith
	T)	'yped or printed name of person signing)
	/m2.1.	Vice President & Secretary
	(Title	of person signing)