## P00000033308

| (Re                                     | equestor's Name)   | <del>_</del> |  |  |
|---|--------------------|--------------|--|--|
| (Address)                               |                    |              |  |  |
| (Address)                               |                    |              |  |  |
| (Ci                                     | ty/State/Zip/Phone | e #)         |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL         |  |  |
| (Business Entity Name)                  |                    |              |  |  |
| (Document Number)                       |                    |              |  |  |
| Certified Copies                        | _ Certificates     | s of Status  |  |  |
| Special Instructions to Filing Officer: |                    |              |  |  |
|   |                    |              |  |  |
|   |                    |              |  |  |
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## COVER LETTER

| TO: Amendment Section   |  |  |  |  |
|---|--|--|--|--|
| Division of Corporations  |  |  |  |  |
| SUBJECT: GT Williams Inc  |  |  |  |  |
| Name of Surviving Entity  |  |  |  |  |
|   |  |  |  |  |
| The enclosed Articles of Merger and fee are submitted i   | for filing.  |  |  |  |
| Please return all correspondence concerning this matter to following:   |  |  |  |  |
| Gragory T Williams  |  |  |  |  |
| Gregory T Williams  |  |  |  |  |
| Contact Person  |  |  |  |  |
| GT Williams Inc   |  |  |  |  |
| Firm/Company  |  |  |  |  |
| 3407 SW 7th St  |  |  |  |  |
|   |  |  |  |  |
| Address   |  |  |  |  |
| Ocala Fl. 34474   |  |  |  |  |
| City/State and Zip Code   | <del></del>  |  |  |  |
| greg.wiliams@servproocala.com   |  |  |  |  |
| E-mail address: (to be used for future annual report notificatio  | n)   |  |  |  |
| For further information concerning this matter, please ca   | 11:  |  |  |  |
|   |  |  |  |  |
| Edwin A Green III Esq   | <sub>,</sub> 352 <sub>,</sub> 732-7218                 |  |  |  |
| Name of Contact Person  | Area Code & Daytime Telephone Number                   |  |  |  |
|   |  |  |  |  |
| Certified copy (optional) \$8.75 (Please send an additional copy of your document if a certified copy is requested) |  |  |  |  |
| Malling Address:  | Street Address:  |  |  |  |
| Amendment Section   | Amendment Section                                      |  |  |  |
| Division of Corporations  | Division of Corporations                               |  |  |  |
| P.O. Box 6327   | The Centre of Tallahassee                              |  |  |  |
| Tallahassee, FL 32314   | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |  |  |  |
|   | i attainassee, i. P. 27262                             |  |  |  |

IMPORTANT NOTICE: Pursuant to s.607.1622(8), F.S., each party to the merger-must be active and current in filing its annual report through December 31 of the calendar year which this articles of merger are being submitted to the Department of State for filing.

## **ARTICLES OF MERGER**

The following articles of merger are submitted in accordance with the Florida Business Corporation Act, pursuant to section 607.1105, Florida Statutes.

| FIRST: The name and jurisdiction of the sur   | viving entity:                    |                        |   |
|---|-----------------------------------|------------------------|---|
| Name GT Williams Inc  | Jurisdiction<br>Florida           | Entity Type  Domestic  | Document Number (If known/ applicable) P00000033308 |
| SECOND: The name and jurisdiction of each   | n <u>merging</u> eligible         | entity:                |   |
| Name  | Jurisdiction                      | Entity Type            | Document Number                                     |
| Hurricane Contracting Inc   | Florida                           | Domestic               | (If known/applicable) P04000026051                  |
|   |                                   |                        |   |
|   |                                   |                        |   |
| THIRD: The merger was approved by each dome by the organic law governing the other parties to the | stic merging corpora<br>e merger. | ition in accordance wi | th s.607.1101(1)(b), F.S., and SEE, FLE             |

FOURTH: Please check one of the boxes that apply to surviving entity:  $\Box$ This entity exists before the merger and is a domestic filing entity. This entity exists before the merger and is not authorized to transact business in Florida. This entity exists before the merger and is a domestic filing entity, and its Articles of Incorporation are being amended as attached. This entity is created by the merger and is a domestic corporation, and the Articles of Incorporation are attached. This entity is a domestic eligible entity and is not a domestic corporation and is being amended in connection with this merger as attached. This entity is a domestic eligible entity being created as a result of the merger. The public organic record of the survivor is attached. This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached. **FIFTH:** Please check one of the boxes that apply to domestic corporations: ☑ The plan of merger was approved by the shareholders and each separate voting group as required. The plan of merger did not require approval by the shareholders.

SIXTH: Please check box below if applicable to foreign corporations

The participation of the foreign corporation was duly authorized in accordance with the corporation's organic laws.

**SEVENTH:** Please check box below if applicable to domestic or foreign non corporation(s).

Participation of the domestic or foreign non corporation(s) was duly authorized in accordance with each of such eligible entity's organic law.

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**EIGHTH:** If other than the date of filing, the delayed effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:

## January 1, 2021

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

| NINTH: Signature(s) for Each Party: |               | <b>_</b>                             |
|-------------------------------------|---------------|--------------------------------------|
| Name of Entity/Organization:        | Signature(s): | Typed or Printed Name of Individual: |
| GT Williams Inc                     | kyrt. L       | Gregory T Williams                   |
| Hurricane Contracting Inc           | AST. LI       | Gregory T Williams                   |
|                                     | 9             |                                      |
|                                     |               |                                      |
|                                     |               |                                      |
|                                     |               |                                      |

Corporations:

General partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships: Limited Liability Companies: Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.) Signature of a general partner or authorized person Signatures of all general partners Signature of a general partner

Signature of an authorized person