## PD2000059610

(Requestor's Name)				
(Ac	ldress)			
(Ac	ddress)			
(City/State/Zip/Phone #)				
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SECNETARY OF STATE
AND AN ASSET FROM THE TO

C. LEWIS

MAY 21 2014

EXAPPREER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: GUNITE, CO	NSTRUCTION & RI	ENOVATIONS, INC.
	BER: P0200005961		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JON G MAZER		
		Name of Contact Person	n
	MAZER & ASSO	CIATES, L.L.C.	
		Firm/ Company	
	7284 WEST PAL	METTO PARK F	ROAD STE 307-S
		Address	
	<b>BOCA RATON F</b>	L 33433	
		City/ State and Zip Cod	e
AM	IYBUCKLEY7@YA E-mail address: (to be us	AHOO.COM sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
AMY BUCKL	.EY	at (954	792-8118
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or 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)
Mailing Address		Street Address	
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

APPKOVE AND FILED

## Articles of Amendment to Articles of Incorporation

14 MAY -9 PM 4: 10

## GUNITE, CONSTRUCTION & RENOVATIONS, INC.

SECRETARY OF STATE TALLAHASSEE, FLURIDA

(Name of Corporation as currently filed with the Florida Dept. of State)
P02000059610
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable:
(Muiling address <u>MAY BE A POST OFFICE BOX</u> )
·····
D. 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,
(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

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 = Trustec; 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 Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	ADAM NEIL BUCKLEY	3900 SW 54 AVENUE
Add				DAVIE, FL 33314
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

attach additional sheets, if necessary).	(Be specific)
1	
ш.,	
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<del></del>	
<del> </del>	
·	



The date of each amendment(s)	adoption: 04/01/2014	14 MAY -9 PK 4: 10	, if other than the
date this document was signed.  Effective date <u>if applicable</u> : 0		SECRETARY OF STATE TALE AHASSEE, FLORIDA	
	(no more than 90 da	ys after amendment file date)	<del></del>
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were a by the shareholders was/were		nber of votes cast for the amendment(s)	
	pproved by the shareholders through or each voting group entitled to vote	voting groups. The following statement separately on the amendment(s):	
	st for the amendment(s) was/were su	• •	
by	(voting group)		
	(voting group)		
The amendment(s) was/were a action was not required.	dopted by the board of directors with	nout shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without	shareholder action and shareholder	
Dated_04/01/	2014		
Signature	CABerson.	_	
(By a selec		if directors or officers have not been nds of a receiver, trustee, or other court	_
	GEORGE BENSON		
	(Typed or print	ed name of person signing)	_
	PRESIDENT		
	(Title o	f person signing)	_