## P0300027606

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A. RAMSEY MAR -9 2074

## COVER LETTER

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Tallahassee, FL 32303

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Guyson Constructi	ion Inc.				
	BER: P03000027606					
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	utter to the following:				
	James D. Guy					
		Name of Contact Person	1			
	Guyson Construction Inc.					
		Firm/ Company				
1499 W. Highway 390						
	Address					
	Lynn Haven, FL 32444					
	City/ State and Zip Code					
	guysoninc@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	on concerning this matter, plea	se call:				
James Guy		at (	258-5856			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:			
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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				

## Articles of Amendment to Articles of Incorporation of

....LED

2024 FEB 21 PM 12 40 Guyson Construction Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P03000027606 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: n/a 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: n/a (Mailing address MAY BE A POST OFFICE BOX) 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

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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)

Example:

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.

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
I) X Change	T	Heather A. Guy	1499 W. Hwy 390
Add			Lynn Haven, FL 32444
Remove			
2) X Change	S	Chelsey Baxstresser	1215 New Hampshire Avenue
Add			Lynn Haven, FL 32444
Remove 3 ) Change	VP	Kyree Baxstresser	1215 New Hampshire Avenue
X Add			Lynn Haven, FL 32444
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, ento (Attach additional sheets, if necessary). (Be spe	<u>r change(s) here</u> : cific)		
n/a	• /		
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F. If an amendment provides for an exchange, re	lassification, or cancellation	n of issued shares,	
provisions for implementing the amendment (if not applicable, indicate N/A)	f not contained in the amen	dment itself:	
n/a			
	****	•	
	<del></del>		

• .

	January 12, 2024	
The date of each amendment(s)		, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amen sufficient for approval.	dment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment(.	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Februa	ry 5, 2024	
Dated		
Signature		
(By a selec	director, president or other officer – if directors or officers have no eted, by an incorporator – if in the hands of a receiver (trustee, or other fiduciary by that fiduciary)	
	James D. Guy	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	