P03000124 14

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
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Amend

MAY 26 2016 I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: GUL	F CONCRETE PUMPING INC
DOCUMENT NUMBER: P0300012	
The enclosed Articles of Amendment	and fee are submitted for filing.
Please return all correspondence conce	rning this matter to the following:
JULIA A FRAN	NKLIN
	Name of Contact Person
GULF CONCR	ETE PUMPING INC
	Firm/ Company
13021 FLYING	SQUIRREL CT
	Address
HUDSON, FL 3	4669
 -	City/ State and Zip Code
JOHNFRANKLIN54	376@YAHOO.COM
	ress: (to be used for future annual report notification)
	•
For further information concerning this	matter, please call:
JULIA FRANKLIN	at (727) 863-3722
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following a	mount made payable to the Florida Department of State:
\$35 Filing Fee S43.75 F. Certificat	iling Fee & Status Status Certified Copy (Additional copy is enclosed) Status Certified Copy (Additional Copy is enclosed) Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231	Clifton Building

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corpo	ration as currently filed with the Florida Dept. of State)
P03000124164	
	ocument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floats Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of th	e corporation:
	The new
	word "corporation," "company," or "incorporated" or the abbreviation Corp," "Inc," or "Co". A professional corporation name must contain the the abbreviation "P.A."
B. Enter new principal office address, if application of the Astractic Address MUST BE A STREET A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	(BOX) = T
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered.	istered office address in Florida, enter the name of the red office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)

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 = 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	JOHN FRANKLIN	13021 FLYING SQUIRREL CT
X Add			HUDSON FL 34669
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Article (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
N/A	(Be specific)		
N/A			
-			
	·· ···		
		·-·-	
			\(\frac{1}{2}\)
	-		
F. If an amendment provides for an exch	inge, reclassification, or ca	ncellation of issued shares,	
provisions for implementing the amer (if not applicable, indicate N/A)	dment if not contained in	ine amenument itseii:	
N/A			
		···	
		<u> </u>	

•	5/23/16	
The date of each amendment(s) date this document was signed.	adoption:	, if other than th
Effective date if applicables	/23/16	
Effective date <u>if applicable</u> :	(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, this dat Department of State's records.	e will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.)
The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	11
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
5/23/16		
DatedSignature	Julia J. Franklin	
	a director, president or other officer – if directors or officers have not been	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	JULIA A FRANKLIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	