P07000056897

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORE	PORATION: UNITED	GENERAL CONTRACTORS	, INC.	
DOCUMENT NU	MBER:P070000	56897	····	
The enclosed Artic	les of Amendment and fee a	re submitted for filing.		
Please return all co	rrespondence concerning thi	s matter to the following:		
		Y / LYNN AUSTIN		
		ame of Contact Person		
	UNITED GENERA	L CONTRACTORS, INC.		
		тип <i>ь</i> Сопрану		
	12628 TEME			
		Address		
		BEACH, FL 3341	2	
	C	ity/ State and Zip Code		
	DWIGHT@UNITE E-mail address: (to be used	DFLA . COM d for future annual report notification)		
For further informa	ation concerning this matter,	please call:		
DWIGHT W		at (<u>954</u>) <u>914 11</u>		
Name	of Contact Person	Area Code & Daytime Tel	ephone Number	
Enclosed is a check	for the following amount m	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		Street Address Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circl Tallahassee, FL 32301	С	

Articles of Amendment Articles of Incorporation of

10 May Apply Control of the Control UNITED GENERAL CONTRACTORS INC (Name of Corporation as currently filed with the Florida Dept. of State) P07000056897 (Document Number of Corporation (if known)

A. If amending name, enter the new name of the corpor	ration:
N/A	The nev
name must be distinguishable and contain the word 'abbreviation "Corp.," "Inc.," or Co.," or the designation name must contain the word "chartered," "professional as	on "Corp," "Inc," or "Co". A professional corporatio
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	SS) N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered one new registered agent and/or the new registered offic	
Name of New Registered Agent: N/A	<u>. </u>
	(Florida street address)
New Registered Office Address: (, Florida
New Registered Office Address: (,
New Registered Office Address: (, Florida, City) (Zip Code)

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
_VP	GRAY, SARAH F	3890 CABBAGE PALM WAY LOXAHATCHEE FL 33470 US	Y ☐ Add ☑ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	or adding additional Articles, en ional sheets, if necessary). (Be sp	vecific)	
	.		
provisions		reclassification, or cancellation of issu t if not contained in the amendment it	

The date of each amendment(s) adoption: <u>MAY 18, 2010</u>			
Effective date <u>if applicable</u> :	(date of adoption is required) MAY 18, 2010			
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.			
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):			
"The number of votes ca	sst for the amendment(s) was/were sufficient for approval			
by	voting group)			
(*	voting group)			
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder			
X The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder			
Dated MA	Drift (v C			
(By ki	director, president or other officer – if directors or officers have not been			
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)			
аррог	men inductary by that inductary)			
	DWIGHT W GRAY			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			