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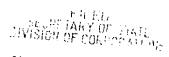
TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: Gulf	Coast Cons	truction + Stuceo Co. Inc.
DOCUMENT NUMBE	r: <u>P'0000</u> 0431	094	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspondence	ondence concerning this ma	tter to the following:	
<u>_</u>	Julf Coast 9	Name of Contact Person  Construction & St  Firm/ Company  Lasey Drive  Address  City/ State and Zip Code	ueco Co.Inc.
		Nd SQ gmail. com sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:	
Travis	<u> </u>	at ( 127	de & Daytime Telephone Number
	Contact Person		
Enclosed is a check for the	he 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)
	g Address Iment Section		Address Iment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to



Articles of Incorporation of

2016 SEP -8 PM 6: 26

Gulf Coast Construction & Stuces Co. Inc.	-0
(Name of Corporation as currently filed with the Florida Dept. of State)	
P0000043194	
(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 (its Articles of Incorporation:	s) t
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)	
<del></del>	
C. Enter new mailing address, if applicable: (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	

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	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Freyn, Jeremy	10039 Casey Drin
Add		, ,	New Port Richey, Fr
X Remove			34654
2) Change	VP_	Mailles, Jessica	10039 Casey Drive
X Add			New Port Richay FC
Remove			270054
3) Change			-
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			·
Add			
Remove			***
6) Change			
Add			
Remove			

	ets, if necessary).	icles, enter change(s) (Be specific)	_ <del>_</del>		
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				issued shares	
f an amendment prov	vides for an exch	ange, reclassification	n, or cancellation of	issueu snares,	
f an amendment prov provisions for impler (if not applicable,	menting the amer	ange, reclassification	n, or cancellation of ned in the amendme	nt itself:	
<u>provisions for impler</u>	menting the amer	ange, reclassification adment if not contain	n, or cancellation of ned in the amendme	nt itself:	
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The date of each amendment(s) ad	lantian.	F. C. L.C.
date this document was signed.	_	JUISION OF CORPURATION
Effective date <u>if applicable</u> :	9-1-2016 (no more than 90 days after ame	2016 SEP -8 PM 6: 26
Note: If the date inserted in this b document's effective date on the De		ling requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes fficient for approval.	s cast for the amendment(s)
	proved by the shareholders through voting grouneach voting group entitled to vote separately of	
"The number of votes cast	for the amendment(s) was/were sufficient for a	pproval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareho	lder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder	action and shareholder
Dated $g$	-1-2016 Davis Meulles	
Signature	havis mulles	
	irector, president or other officer – if directors d, by an incorporator – if in the hands of a rece	
	ted fiduciary by that fiduciary)	,
,	Travis S. Mailles (Typed or printed name of person s	
	_	igning)
	President	
	(Title of person signing	g)