Division of Corporations

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000248472 3)))



H140002484723ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : SHANE M. SMITH, P.A.

Account Number : I20140000004 Phone : (321)724-1919

Fax Number : (321)723-8218

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please \*\*\* Email Address:

RECEIVED

## COR AMND/RESTATE/CORRECT OR O/D RESIGN JERRY JOHNS' MARINE CONSTRUCTION, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

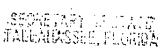
Electronic Filing Menu

Corporate Filing Menu

OCT 24 2014 Help **C. CARROTHER**S

Articles of Amendment to Articles of Incorporation of

遊OCT 23 AH 9: 38



## JERRY JOHNS MARINE CONSTRUCTION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P12000060315

amendment(s) to

| 710                            |   |  |   |
|--------------------------------|---|--|---|
| f Corporation (if know         | vn)   |  |   |
| a Statutes, this <i>Florid</i> | la Profit Corporation   | adopts the following ar  | mendm   |
| orporation:                    |   |  |   |
|                                | A professional corpo  |  | eviation  |
| <u>e:</u>                      |   | ·  |   |
| DRESS)                         |   |  |   |
|                                |   |  |   |
|                                | ·   |  |   |
| <u></u>                        |   | ······································   |   |
|                                | Florida, enter the na   | me of the  |   |
| office autress:                |   |  |   |
|                                |   | _  |   |
| (Florida street add            | ress)   | -  |   |
|                                | , Florida   | <b>.</b>   |   |
| (City)                         |   | (Zip Code)   |   |
| istered Agent:                 |   |  |   |
| I am familiar with an          | d accept the obligation   | ns of the position.  |   |
| w Registered Agent,            | fchanging   | -  |   |
|                                | Corporation (if known a Statutes, this Florida Statutes, this Florida Statutes, this Florida Statutes, this Florida Street address:  (Florida street address:  (Florida street address:  (Florida street address: | Corporation (if known)  a Statutes, this Florida Profit Corporation  orporation:  d "corporation," "company," or "incorp. ""Inc," or "Co" A professional corpo. abbreviation "P.A."  EDRESS )  (Statutes, this Florida, enter the national corporation of the professional corporation of the profession of the profession of the profession of the profession | Corporation (if known)  a Statutes, this Florida Profit Corporation adopts the following an original propertion:  The discorporation, ""company," or "incorporated" or the abbre, ""Inc," or "Co". A professional corporation name must con abbreviation "P.A."  EDRESS  XX)  Ted office address in Florida, enter the name of the office address:  (Florida street address)  (City)  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)

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, Salty Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Salty Smith, SY as an Add.

| Example: X Change             | <u>PT</u> | John Do        | <u>e</u>    |             |                    |
|-------------------------------|-----------|----------------|-------------|-------------|--------------------|
| X Remove                      | <u>v</u>  | Mike Jo        | nes         |             |                    |
| X Add                         | <u>sv</u> | Sally Sm       | <u>zith</u> |             | •                  |
| Type of Action<br>(Check One) | Title     |                | Name        | •           | <u>Audres</u> s    |
| 1) Change                     | D         |                | FEDERICO I  | MENDOZA-    | 114 HURST RD NE    |
| Add                           |           |                |             | TORRES      | PALM BAY, FL 32907 |
| Remove                        |           |                |             |             |                    |
| 2) Change                     |           |                |             |             |                    |
| Add                           |           |                |             |             | <del></del>        |
| Remove                        |           |                |             |             |                    |
| 3) Change                     |           | _              |             | <del></del> |                    |
| Add                           | ·         |                |             |             |                    |
| Remove                        |           |                |             |             |                    |
| 4) Change                     |           | <del></del>    |             | <del></del> |                    |
| Add                           |           |                |             |             |                    |
| Remove                        |           |                |             |             |                    |
| 5) Change                     |           |                |             |             |                    |
| Add                           |           | <del>_</del>   |             | <del></del> |                    |
| Remove                        |           |                |             |             |                    |
|                               |           |                |             |             |                    |
| 6) Change                     |           | <del>_</del> . |             |             |                    |
| Add                           |           |                |             |             |                    |
| Remove                        |           |                | •           | •           |                    |

| ttach additional sheets, if necessary). | (Be specific)  |
|---|--|
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| •                                       |  |
|   |  |
| · · · · · · · · · · · · · · · · · · ·   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| an amendment provides for an even       | nange, reclassification, or cancellation of issued shares, |
| rovisions for implementing the ame      | ndment if not contained in the amendment itself:           |
| (if not applicable, Indicate N/A)       |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| _                                       |  |
| ·                                       |  |
|   |  |

| The date of each amendment(s) adoption: OCTOBER 23, 2014   | if other than |
|--|---------------|
| date this document was signed.   |               |
| Effective date if applicable: OCTOBER 23, 2014  (no more than 90 days after amendment file date)   | <del></del>   |
| (no nero man so augo igis) amenament yne aareg   |               |
| Adoption of Amendment(s) (CHECK ONE)   |               |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.   |               |
| The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):         |               |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  |               |
| by   |               |
| (voing group)  |               |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  |               |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |               |
| Dated OCTOBER 23, 2014   | •             |
| Signature of the Signature   |               |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | ·             |
| JERRY JOHNS  |               |
| (Typed or printed name of person signing)  | <del></del>   |
| PRESIDENT  |               |
| (Title of person signing)  | <del>_</del>  |